DOCUMENT RESUME

ED 078 170 VT 020 338

TITLE	Occupational Therapy Job Descriptions. Development of Occupational Therapy Job Descriptions and Curricula through Task Analysis. Report Number One.
INSTITUTION	Ohio State Univ., Columbus. School of Allied Medical Professions.
SPONS AGENCY	Public Health Service (DHEW), Washington, D.C.
PUB DATE	72
NOTE	73p.
AVAILABLE FROM	Occupational Therapy Division, School of Allied Medical Professions, College of Medicine, Ohio State University, 1533 Perry St., Columbus, OH 43210 ($6.00 for set)
EDRS PRICE	MF-$0.65 HC-$3.29
DESCRIPTORS	Career Ladders; *Curriculum Development; Employment Qualifications; *Health Occupations Education; Job Analysis; *Occupational Information; Occupational Therapists; *Occupational Therapy; Occupational Therapy Assistants; Professional Personnel; Subprofessionals; *Task Analysis; Task Performance

ABSTRACT

In developing job descriptions and curriculum for an occupational therapy program, the U. S. Department of Labor's occupational analysis and job structuring procedure was adapted by project staff with the assistance of the Ohio Bureau of Employment Service and the U. S. Department of Labor, Occupational Analysis Division. Six teams, each consisting of a trained occupational analyst and an occupational therapist, observed and recorded duties and tasks performed by staff members of 15 selected facilities throughout the U. S. The lists of duties and tasks were assessed by 63 occupational therapy educators and practitioners to identify missing activities or delete non-relevant activities. During a job restructuring conference, the duties and tasks assessed by the educators and practitioners were divided into four job levels based on the educational and vocational level of training needs for each duty and task. In addition, job descriptions were developed for each of the job levels, which included: (1) occupational therapy aide, (2) occupational therapy technician, (3) occupational therapist, and (4) occupational therapy consultant. This publication contains a chart indicating the division of responsibility for each level, along with a narrative summary of each job description and a detailed description of each level with its activities and elements. Related documents are available as VT 020 339 - VT 020 341 in this issue. (SB)

ED 078170

DEVELOPMENT OF OCCUPATIONAL THERAPY JOB DESCRIPTIONS
AND CURRICULA THROUGH TASK ANALYSIS

REPORT NUMBER ONE

OCCUPATIONAL THERAPY JOB DESCRIPTIONS

SCHOOL OF ALLIED MEDICAL PROFESSIONS
The Ohio State University
Columbus, Ohio 43210

Grant No. 5 D02 AH 00964 01, 2

Department of Health, Education and Welfare
Public Health Service

VT020338

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Report Number One
Department of Health, Education and Welfare
Grant #5 D02 AH 00964 01,2
conducted under the direction of
Kathryn T. Schoen, Ph. D.

"Development of Occupational Therapy Job Descriptions and Curricula through Task Analysis"

OCCUPATIONAL THERAPY JOB DESCRIPTIONS

John S. Camiscioni, M.A.,
Co-Director
Rosa M. Hartsook, O.T.R.,
Project Administrator
Robert S. Bloom, M. Ed.,
Curriculum Specialist
Gwyn D. Angus, M. Ed.,
Evaluation Specialist
Laurie H. Jones, A.B.,
Research Assistant

SCHOOL OF ALLIED MEDICAL PROFESSIONS
College of Medicine
The Ohio State University
Columbus, Ohio 43210
July 1, 1970 through June 30, 1972

The work presented or reported herein was performed pursuant to a Grant from the U.S. Department of Health, Education and Welfare, Public Health Service. However, the opinions expressed herein do not necessarily reflect the position or policy of the U.S. Department of Health, Education and Welfare, and no official endorsement by this office should be inferred.

The work presented or reported herein was prepared with consultation and assistance from members of The American Occupational Therapy Association, Inc. The findings presented herein, however, do not necessarily reflect the position or policy of The American Occupational Therapy Association, and no official endorsement by the Association should be inferred.

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ACKNOWLEDGEMENTS

The staff would like to express their sincere thanks to many people who have contributed their time and expertise to this project. Excellent cooperation was offered from representatives of the American Occupational Therapy Association, the United States Department of Labor, the Ohio Bureau of Employment Services, department chairmen of accredited and approved occupational therapy curricula, clinicians, and professionals in related health care services. Occupational analyses in seventeen occupational therapy departments were made possible through the efforts of each facility's administrator and department supervisor.

Representatives from the United States Department of Labor:

Leon Lewis, Chief
Division of Occupational Analysis and Career Information Personnel
U.S. Training and Employment Service
U.S. Department of Labor
Longfellow Building
Washington, D.C.

Adeline Padgett
Division of Occupational Analysis and Career Information Personnel
U.S. Training and Employment Service
U.S. Department of Labor
Longfellow Building
Washington, D.C.

Representatives from the Ohio Bureau of Employment Services:

Otis Cooper
State Supervisor of Occupational Analysis and Industrial Services
Ohio State Employment Bureau
Columbus, Ohio

Paul Mazuzan
Ohio Bureau of Employment Services
Occupational Analysis and Industrial Services Section
Columbus, Ohio

Planning Advisory Committee:

Robert J. Atwell, M.D.
Director
School of Allied Medical Professions
The Ohio State University
Columbus, Ohio

Clyde Butz, M.P., O.T.R.
Director
Division of Functional Programming
State of New York
Department of Mental Hygiene
Division of Mental Health
Albany, New York

Florence Cromwell, M.A., O.T.R.
Adjunct Associate Professor
University of Southern California
Occupational Therapy Department
Los Angeles, California

Charles W. Dohner, Ph.D.
Director
Office of Research in Medical Education
School of Medicine
The University of Washington
Seattle, Washington

Nedra Gillette, O.T.R.
Consultant
Columbia University
Occupational Therapy Curriculum
New York, New York

George Harding, Sr., M.D.
Harding Hospital
Worthington, Ohio

Ralph W. Ingersoll, Ph.D.
Assistant Dean
College of Medicine
University of Virginia
Charlottesville, Virginia

Planning Advisory Committee (continued):

Paul Klohr, Ph.D.
Professor of Education
The Ohio State University
Columbus, Ohio

Cornelius Kooiman, M.A., O.T.R.
Director
School of Occupational Therapy
Virginia Commonwealth University
Richmond, Virginia

James I. Lore, Ph.D.
United States Public Health Service
Chicago, Illinois

Leland Miller, Ed.D., O.T.R.
Director of Occupational Therapy Department
University of Kansas
Lawrence, Kansas

Ronald Spaeth, M.B.A.
Assistant Administrator
The Ohio State University Hospitals
Columbus, Ohio

Patricia Taylor, O.T.R.
Coordinator, Activities Therapy
Ypsilanti State Hospital
Ypsilanti, Michigan

W. Loren Williams, Jr., Ph.D.
Professor of Psychology and
Director, Division of Educational Research
and Development
Medical College of Georgia
Augusta, Georgia

Cooperating Facilities:

California:	West Side Therapy Los Angeles, California
	Memorial Hospital of Long Beach Long Beach, California
	Mrs. Lawrence Kovalendo Private Practice Los Angeles, California
Washington:	Spastic Children's Clinic Seattle, Washington
	Fircrest School Seattle, Washington
	Northwest Regional Rehabilitation Center Services for the Blind Seattle, Washington
Florida:	Lakeland Manor Lakeland, Florida
	Saint Elizabeth's Hospital Tampa, Florida
	Memorial Hospital Sarasota, Florida
New York:	Montefiore Hospital Bronx, New York
	Veterans Administration Hospital Bronx, New York
	Goodwill Industries, Inc. Buffalo, New York
Wisconsin:	Therapy Services, Inc. Milwaukee, Wisconsin
	Milwaukee County Mental Health Center Milwaukee, Wisconsin
	Curative Workshop of Milwaukee Milwaukee, Wisconsin
Ohio:	Neil Avenue School Columbus, Ohio
	Dodd Hall Rehabilitation Center Ohio State University Hospitals Columbus, Ohio

Job Analysis Teams:

California: Diana Arellano, Occupational Analyst
Department of Human Resources Development
Sacramento, California

Jan Liptak, O.T.R.
Burbank, California

Washington: Barbara Taylor, Occupational Analyst
Employment Security Department
Olympia, Washington

Kathlyn Reed, O.T.R.
Seattle, Washington

Florida: Dennis A. Doyle, Occupational Analyst
Florida Bureau of Employment Services
Occupational Analysis Field Center
Tampa, Florida

F. Evelyn Marsh, O.T.R.
Tampa, Florida

New York: James F. Rosa, Occupational Analyst
New York State Department of Labor
Rochester, New York

Antoinette Yerkes, O.T.R.
Albany, New York

Wisconsin: Kenneth Koppenhaver, Occupational Analyst
Wisconsin State Employment Services
Occupational Analysis Field Center
Madison, Wisconsin

Ann Gralewicz, O.T.R.
Greenfield, Wisconsin

Ohio: Herschel Richeson, Occupational Analyst
Ohio Bureau of Employment Services
Hamilton, Ohio

Hanley Cone, Occupational Analyst
Ohio Bureau of Employment Services
Columbus, Ohio

Sharon La Dow, O.T.R.
Columbus, Ohio

PROJECT SUMMARY

PROJECT DEVELOPMENT[1]

Project objectives, occupational therapy facilities to be analyzed, and proposed analysis and evaluation procedures were outlined under the direction of a Planning Advisory Committee. The United States Department of Labor's occupational analysis procedure was adapted by the project staff with assistance from representatives of the Ohio Bureau of Employment Service and the United States Department of Labor, Occupational Analysis Division.

Six teams, each consisting of one professional occupational analyst and one occupational therapist, observed and recorded duties and tasks performed by staff members of fifteen selected facilities throughout the United States.

The Planning Advisory Committee set the criteria for facility choice. The total sample represented acute/restorative, preventive, and maintenance types of care in both physical and psychosocial function areas. Each facility also met secondary standards so that the total sample represented: 1) a wide age distribution of clients, 2) funding from public and private sources, 3) inservice and clinical education facilities and programs, 4) small to large occupational therapy facilities, and 5) all job levels in occupational therapy from aide to consultant.

See Figure 1, page 2, for a chart of Year I activities:

The Ohio State University
School of Allied Medical Professions
HEW, PHS Grant # 1 D02 AH 00964-01
"Development of Occupational Therapy Job Descriptions
and Curricula Through Task Analysis"

Process Flow Chart
Year I

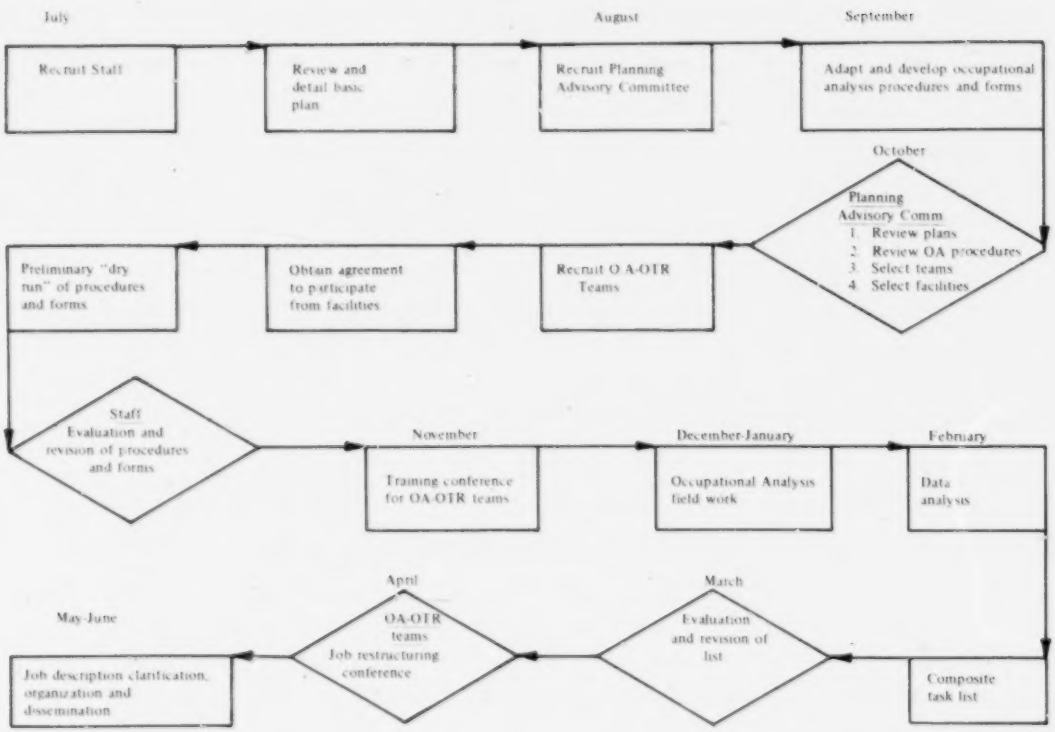

FIGURE 1

DATA ANALYSIS

The initial data were collected by the job analysis teams from December 1970 to March 1971. Each report contained major activity headings and elements of each activity. Overall there were 264 activity statements and 1458 element statement. The data were compiled in two different ways: first, a statistical analysis of the numerical ratings associated with the analyst's statements was performed, and second, a sorting of the statements based on their verbal content was done.

ANALYSIS OF NUMERICAL RATINGS

The mean general educational development and specific vocational preparation for all reported activities appeared relatively high, as were the mean ratings for intelligence and verbal aptitudes. The mean ratings for eye-hand-foot coordination and color discrimination tended to be low. In looking at correlations, those among general educational development, specific vocational preparation, intelligence and verbal aptitudes were high. Second, the correlations among spatial aptitudes, form perception, motor coordination, finger dexterity and manual dexterity were high. It would appear that there are two major dimensions to occupational therapy activities. These might be termed an education-cognitive dimension andaa perceptual-motor dimension.

Analysis of the interests ratings indicated that over 50% of the activities seen represented:

1) "Situations involving a preference for activities concerned with people and communication of ideas versus situations involving a preference for activities dealing with things and objects."[2,3]
2) "Situations involving a preference for working with people for their presumed good versus situations involving a preference for activities that are non-social in nature."[2,3] (57.6%)

Analysis of the temperament ratings indicated that over 50% of the activities seen represented:

1) "Situations involving the necessity of dealing with people in actual job duties beyond giving and receiving instructions."[2,3] (70.1%)
2) "Situations involving the direction, control, and planning of an entire activity or the activities of others."[2,3] (52.2%)
3) "Situations involving the evaluation (arriving at generalizations, judgments, or decisions) of information against sensory of judgment criteria."[2,3] (55.7%)

Analysis of the physical involvement and environmental conditions revealed that 92% of the activities were viewed as being sedentary or light, 6% as medium and only 2% as heavy or very heavy. The overwhelming majority of activities occur inside, and only 1.5% involved outside activities.

Each of the task statements was rated according to worker involvement with data, people, and things (D.P.T. ratings). The mean, standard deviation, and range of 1458 task statements were computed. The highest mean ratings were in the data category; next highest, in the people category; and lowest, in the things category. The correlation between data and people, while significant, was not high. The data, people and things functions were largely independent of each other. This must be interpreted with caution since the people ratings may not be hierarchical, as are the data and things ratings. While findings of "interest and temperament" ratings indicate that occupational therapy is a "people-oriented" profession, the D.P.T. ratings do not. The high data involvement is probably data about people and their activities.

VERBAL CONTENT EVALUATION

Information was also sorted and compiled on the basis of its verbal content. Similar statements were organized into a Composite Activity List: a logical (either sequential or functional) order of composited major activities headings, with composited elements grouped under each major activity. This list of 47 activities and 387 elements was presented as a survey questionnaire to a representative sample (96 individuals) of occupational therapy educators at both baccalaureate and technical levels, and occupational therapy clinicians, both Occupational Therapists, Registered and Certified Occupational Therapy Assistants. This evaluator group was asked to: 1) identify those activities that should not be the responsibility of occupational therapy personnel, 2) identify those activities which should be changed to reflect more effective or current procedures, and 3) describe ongoing activities which were not included in the listing. Of the 96 surveys questionnaires sent, there were 63 respondents. From these responses the following changes were made:

a. Those items which the respondents indicated should not be the responsibility of occupational therapy personnel were deleted from the Composite Activity List if the number of evaluator responses equaled or exceeded the .05 (one-tailed) level of significance. Of the 47 original activities, two were deleted. They related to 1) obtaining sub-contracts for sheltered workshop workers and 2) transportation of clients. Of the 387 elements, 16 were deleted. Deleted elements related to: 1) evaluating clients' classroom skills, 2) transporting or escorting clients, 3) providing recreation programs and entertaining clients, 4) managing client payment for materials, 5) keeping payrolls and paying staff, 6) making decorations and craft projects for clients, and 7) running errands and delivering messages.

b. The evaluator group suggested 489 changes in wording of the statements. These suggestions were grouped and compared with the original activity and element statements. All suggested changes were incorporated into the Composite Activity List unless the suggestions were at variance or opposite in meaning

to each other or the original statement, in which case the majority of statements relating to the activity or element were accepted.

c. The evaluator group suggested a total of 72 additions. These suggestions were grouped into activity and element statements. Since one of the objectives of the Composite Activity List Evaluation was completeness, all suggested additions were combined into five new activity statements and twenty-six new elements statements. These statements were then assigned ratings by occupational analysts. The additions related to 1) consultant activities in preventive health care, 2) research, and 3) state consultant activities in state institutions.

Changes, deletions, and additions were incorporated into the Composite Activity List, with a resulting list of 50 activities and 397 elements for review during a job restructuring conference.

JOB RESTRUCTURING

The objective of the job restructuring conference was to develop job descriptions from the Composite Activity List by assigning a level of complexity rating to each activity and element statement. Primary decision making was the responsibility of the teams who had done the original data collection, with assistance and input from consultants with expertise in occupational analysis, in medical education and research, and in occupational therapy practice. The group chose to use the general educational development (GED scale, ranging from the high level of 6 to the low level of 1, as developed by the United States Department of Labor, Division of Occupational Analysis to establish the primary criterion for determining the complexity of each activity. General educational development is defined as:

> "... Those aspects of education (formal and informal) which contribute to the worker's (a) reasoning development and ability to follow instructions, and (b) acquisition of "tool" knowledges, such as language and mathematical skills. It is education of a general nature which does not have a recognized, fairly specific, occupational objective. Ordinarily such education is obtained in elementary school, high school, or college. It also derives from experience and individual study."[2]

Secondary criteria used in job restructuring were two sets of combined numerical composited ratings: one in the cognitive-educational dimension, and the second in the perceptual-motor dimension. These ratings were derived from the original data analysis.

The conferees were divided into small heterogeneous groups. Each group reviewed an assigned number of activities and their elements, one at a time, and assigned each statement to the appropriate GED level. In

some cases the activity and element statements were broken into component parts, with the parts assigned to one or more of four different levels. After activities and elements were assigned to GED level(s), the levels were reviewed by the total group for continuity of client care and feasibility of worker activity. The group also made suggestions for organizing the job descriptions and writing the activity statements to reflect clearly the level of complexity.

Statements in rough draft of the four job descriptions compiled during the job restructuring conference were organized and rephrased by the staff, an occupational analyst, and an expert in expository writing, to define clearly and concisely the parameters of each level of function in accordance with the guidelines set during the job restructuring conference. The job descriptions were reported in four ways: 1) a chart indicating the division of responsibilities for each level (pages 17-18), 2) a narrative summary of each job description (pages 19-25), and 3) a detailed description of each level with its activities and elements (pages26-72).

EMPLOYABILITY OF PEOPLE

A survey was conducted to determine the feasibility of job descriptions, and the employability of persons having those skills and abilities. Fifty-seven facilities employing occupational therapists were surveyed, and of twenty-eight respondents, over 80% indicated that they would employ individuals trained at Level 5, 4, and 3. An individual at level 6 was less in demand and was thought to be a person who should be affiliated with a university, a research person, or employed as a consultant. The majority of the respondents felt that the job descriptions would be feasible within the next five years with decreased emphasis on Level 3. The respondents did state that the descriptions would not apply, in all aspects, to their individual settings.

JOB DESCRIPTIONS TITLES

In the above survey, respondents were also asked to assign titles to the then untitled job descriptions. The majority of responses are listed on the left side of the chart (Figure 2) below. At a later conference, the Planning Advisory Committee was asked to review the survey responses, the GED scales, and the verbal content of the job descriptions. Their decisions are listed on the right hand side of the chart below:

FIGURE 2

Titles Assigned to Project Job Descriptions

		Majority of Employers' Responses	Planning Advisory Committee Decisions
GED	Level 6	Education and Research Coordinator Research Occupational Therapist Occupational Therapy Consultant	Program Development (Occupational Therapy Consultant)
GED	Level 5	Director or Supervisor of Occupational Therapy Senior Staff Therapist	Program Supervision (Occupational Therapist)
GED	Level 4	Staff Occupational Therapist	Program Implementation (Occupational Therapy Technician)
GED	Level 3	Occupational Therapy Assistant Occupational Therapy Aide	Program Support (Occupational Therapy Aide)

There is an interesting contrast at level 4. The majority of questionnaire respondents saw the level 4 description as being worker activities of a staff therapist, while the Planning Advisory Committee saw the level 4 description as a technician's position. An explanation for this difference in opinion may be that respondents made their decision based upon job description summaries only. The Planning Advisory Committee used additional data from the job descriptions, the GED scales, and the job restructuring manual before making their group decision.

INTERFACE WITH OTHER HEALTH PROFESSIONS

A second survey using the restructured job descriptions was directed to other professional organizations and representatives of selected professional curricula, such as: The National Association for Social Workers; The American Medical Association; The College of Nursing, University of Florida; and The American Physical Therapy Association. These groups were sent a list of occupational therapy activities for each worker level and were asked to indicate on five point scales: 1) if they also were prepared to perform these activities, 2) the amount of coordination needed between occupational therapy and their professions, and 3) the importance of the activity to the client/patient. Twenty-five surveys were sent. There were twelve respondents who completed the questionnaire (four additional groups responded, but did not complete the questionnaire).

In response to item 1 above, the respondents indicated their professions were not prepared to perform over 40% of the duties at each level, and were prepared to perform only "some aspects" of approximately 30% of the duties. Respondents reported that they were prepared to perform a very small number of duties (1% to 4%) more appropriately than occupational therapy, but felt that they were also prepared to perform about 15% of the duties at each level. In response to item 2 above, they indicated that about half of the client care activities were a team responsibility which should be coordinated with other health care personnel, and about half were an independent function of occupational therapy. In response to item 3, the majority of duties at each level were reported as being essential to all or to specific clients. None of the duties at any level were "of no importance", and only a small percentage were"useful in limited cases". About 18% of the responses indicated "no basis for judgment" in determining the importance of the activity to the client.

Overall, it would seem that other health professions view occupational therapy as an important part of client care. While respondents reported that they were not prepared to do nearly half of the occupational therapy activities, there was a sizeable area of overlap in worker activity and professional preparation between occupational therapy and other health professions. This overlap was not reflected as undesireable. It can be concluded that a high degree of corrdination between occupational therapy and other health services is needed, particularly in client care activities. While a very large majority of responses indicated that occupational therapy offers necessary and unique services to the client, a significant percentage of responses to the same question indicated "no basis for judgment". This may indicate a lack of familiarity with occupational therapy services within these other professions.

JOB DESCRIPTIONS

In order to clarify the activity flow, relationships, overlaps, and similarities between job levels, a chart was developed from the detailed job descriptions to identify each job level's involvement with a given activity. (See Figures 3 and 4, pages 10- 11 .) Note that the two charts represent two primary worker activity headings: Client Services and Related Services. Note also that the descriptions of worker level activity overlap in some aspects and are independent in other aspects. The higher levels do not necessarily require the ability to do all the activities involved in the lower level descriptions.

REFERENCES

1. This summary is excerpted from an article submitted to the American Journal of Occupational Therapy for consideration for publication.

2. U.S. Department of Labor, Manpower Administration: Dictionary of Occupational Titles. 2, 3rd ed., 1968.

3. U.S. Department of Labor, Manpower Administration: A handbook for job restructuring, 1970.

The Ohio State University
School of Allied Medical Professions
HEW, PHS Grant # 5 D02 AH 00964 02

"Development of Occupational Therapy Job Descriptions
and Curricula Through Task Analysis"

Occupational Therapy Job Descriptions

Primary Worker Activities: Client Services

Activity	Program Support (Occupational Therapy Aide)	Program Implementation (Occupational Therapy Technician)	Program Supervision (Occupational Therapist)	Program Development (Occupational Therapy Consultant)
1. Intake		Gathers and reviews pertinent data	Determines suitability of client for evaluation and O.T. services.	
2. Client Evaluations		Administers standard evaluations	Selects and administers evaluations, analyzes results	
3. Treatment Planning		Plans activities.	Formulates goals and treatment plan.	
4. Treatment Implementation and coordination	Prepares materials and area for treatment activities, transports or escorts clients, assists during treatment.	Implements treatment according to plan, guides client performance	Implements and coordinates O.T. treatment with overall program, supervises staff implementation.	
5. Developmental and Perceptual Motor Function	Assists clients during specified activities.	Arranges and demonstrates activities, guides client performance.	Formulates and implements therapeutic program to stimulate maturation.	
6. Psychosocial Function	Aids client in activities, supports and encourages client	Arranges therapeutic activities as directed, guides client as planned and directed.	Formulates, coordinates and implements therapeutic activities plan to guide and modify behavior.	
7. Physical Function	Assists client in specified motor or self help activities, constructs supportive or assistive devices.	Plans routine motor progression, guides and instructs client, constructs splints, supportive or assistive devices, instructs activities of daily living.	Formulates, designs and implements therapeutic motor activities, orthotic or assistive devices and training for independent function.	
8. Prevocational Training		Evaluates and trains clients as directed.	Develops programs to supervise and train clients.	
9. General Activities Programs	Implements recreational and arts and crafts activities.	Organizes and implements activities programs.		
10. Client's Family and Community		Informs, instructs and confers with family and health care workers.	Informs, counsels and consults with family and health care workers.	
11. Treatment Records	Reports verbally takes attendance	Records evaluation and treatment data, verbal and written reports to treatment team.	Analyzes, summarizes and composes reports, verbal and written reports to referral sources.	
12. Termination or Follow-Up		Recommends termination, assists in formulation of discharge plans, implements discharge plan.	Formulates discharge plans with treatment team.	
	G.E.D. 3	G.E.D. 4	G.E.D. 5	G.E.D. 6

FIGURE 3

Occupational Therapy Job Descriptions

Primary Worker Activities - Related Services

Activity	Program Support (Occupational Therapy Aide)	Program Implementation (Occupational Therapy Technician)	Program Supervision (Occupational Therapist)	Program Development (Occupational Therapy Consultant)
13. Program Planning and Coordination		Exchanges information concerning policies and procedures, makes suggestions	Coordinates overall program with overall establishment goals	Formulates, integrates and coordinates policies, procedures and programs
14. Program Management	Maintains clean and functioning work areas and materials	Maintains functional operating level of equipment, materials and supplies	Organizes and directs O.T. services and activities	
15. Personnel Management		Gathers information for personnel recruitment	Recruits, selects, orients, trains, supervises and evaluates O.T. staff	
16. Program Reporting			Writes activity and service reports	
17. Self Education	Attends training sessions, reads texts and manuals, receives on-the-job instruction	Attends lectures and training sessions, reads texts and educational material, receives on-the-job instruction	Attends lectures and training sessions, reads texts and other materials	Attends lectures and training sessions, reviews educational materials
18. In-Service Education			Plans, organizes and directs in-service programs as requested	
19. Clinical Education		Orients, trains, demonstrates techniques as requested for staff, students, volunteers or workshop groups	Plans, organizes, coordinates and administers clinical training programs	
20. Volunteer Training			Plans and organizes training for assigned volunteers	
21. Continuing Education			Organizes and partakes in programs	Formulates and implements programs
22. Public Information		Conducts tours, talks and demonstrations as assigned	Informs through lectures and discussions of principles of O.T. and goals of establishment	
23. Research		Compiles and conveys data	Implements research projects as team member	Plans, arranges and conducts research projects
24. Preventive Health Consultation			Proposes screening programs and day-care facilities	
25. Program Planning for Consultee Agency			Plans and develops general activities programs	Plans and develops specific O.T. programs or proposals
26. Consultee Agency Staff Training			Plans and implements training program for consultee staff	
27. Continuing Consultation			Advises and instructs O.T. methods on continuous basis to consultee staff	
28. Data Collection for Consultee Program Planning		Collects data as requested to provide information for program planning	May coordinate collection and review of data to determine potential consultee needs	
	G.E.D. 3	G.E.D. 4	G.E.D. 5	G.E.D. 6

FIGURE 4

JOB DESCRIPTION SUMMARY

Program Support (Occupational Therapy Aide)
(GED Level 3) (355 - 564)

General Definition: Assists occupational therapy staff in treating and training clients with psychosocial or physical dysfunction by implementing programs designed to habilitate or rehabilitate clients in hospital, or other setting:

Confers with occupational therapist or staff specialist to arrange details of daily work schedule, following professional instructions and treatment plan. Escorts client to and from treatment or training area by instructing and aiding client into wheelchair, assisting client in pushing wheelchair, and walking with or assisting client to area. Aids client by supporting or lifting and positioning into and out of bed, wheelchair, or stand-in-table. Guides client through workshop by touring and explaining kind, location, and use of equipment while adapting explanation and method of tour to client's capabilities. Organizes clients into groups and distributes arts and crafts materials and supplies. Assists client during therapeutic activity by explaining activity to client, observing performance, praising and encouraging appropraite responses, and changing activity according to attention span of client. Aids client by leading such group activities as card games, music, gardening, singing, and such special events as parties and picnics. Observes client for signs of fatique and distress, and adjusts activities appropriately. Exchanges information concerning client with other staff by observing and reporting his behavior, and by attending meetings in which client's treatment is discussed.

Reports attendance by tabulating number of clients, names, and times attended, and by posting data according to established procedures. Completes accident or incident reports by following prescribed procedures.

Fabricates, modifies, or adapts slings, splints, and self-help devices to assist client in obtaining optimal physical independence by forming, cutting, and sewing materials and attaching fasterners according to directions. Informs supervisor of discomfort and poor fit of splint or device by observing and reporting white or red pressure spots on client's extremities.

Maintain occupational therapy work areas by cleaning, transporting, storing, and inspecting materials, equipment, and supplies.

Performs related duties: Receives continuing education and training by participating in programs to up-grade job knowledge and to aide in keeping abreast of developments in field. May entertain clients by securing films, and operating projector, or by assisting volunteer entertainers.

Program Implementation (Occupational Therapy Technician)
(GED Level 4) (079.238)

General Definition: Organizes and implements occupational therapy activities in hospitals, client's home or other settings to habilitate or rehabilitate physically or psychosocially disabled clients:

Plans occupational therapy activities previously designed to assist individual client to regain or maintain physical and psychosocial function and to assist client adjustment to disability. Treats or trains client according to established goals by applying and adapting plan and modifying activity to meet specific client situations to obtain therapy goals. Confers with staff for guidance and aid to discuss and evaluate client's function, progress, and plan for therapy. Schedules and coordinates client treatment or training by reviewing availability of client, staff, and facilities, and by verifying "treatment or training" work ability with both client and staff. Tests client's abilities by conducting assigned standard tests or evaluations, and by recording results in order to convey information for evaluation purposes.

Guides and encourages client to develop higher level of maturation by arranging activities typical of normal developmental continuum, and by aiding behavioral modification. Guides client with development of perceptual recognition and discrimination by directing activities according to treatment plan.

Guides and modifies behavior of client demonstrating psychosocial dysfunction by participating in inter-personal social group sessions, providing task or work-oriented group activities, and by suggesting client activities outside institutional setting.

Implements and instructs clients therapeutic motor activities by planning routine progression, and by leading and demonstrating activities, including body movements, to promote optimal physical function within disability limits. Selects, makes, or provides client with self-help devices. Fabricates splints according to instructions. Modifies, adjusts, and fabricates body supports or controls. Examines and tests client use of prosthetic device by conducting standard checkout procedures and by conferring with prosthetist. Trains client in use of device by presenting problem-solving situations that will later be utilized in daily life. Instructs client in methods of self-care, housekeeping, and child-care tasks by demonstrating such tasks as grooming, feeding, dressing, cooking, or cleaning, using principles of work simplification, substitute motions, and assistive devices.

Trains client on prevocational basis by evaluating work potential (such as work habits, work skills, work tolerance levels), teaching skills, and supervising practice to prepare for vocational training to enhance client employability in sheltered setting.

Plans and implements arts and crafts activities to meet client's activity needs, interests, and skills by providing various craft media in variety of settings, such as health care facilities, day-care centers, sheltered workshops, and client's home. Implements and coordinates recreational activities and client services to community service by suggesting client service projects. Suggests special services for homebound clients by exchanging information with social service staff or volunteer agencies to arrange for them to provide service (such as reading to blind, shopping or tutoring).

Informs and confers with client's relatives or health care workers in home or establishment by writing periodic reports, by demonstrating methods and use of equipment, and by discussing client's capabilities and problems.

Reports client responses to supervisor. Documents evaluation, implementation, and integration of treatment or training and client progress by writing and distributing reports, or by reporting verbally to promote communication, to evaluate progress and to maintain legal and financial records.

Recommends termination of formal occupational therapy services by recording progress and suggesting future recourse. Readies client for discharge by implementing discharge plans.

Orients and trains assigned staff, students, volunteers, and conference or workshop groups by guiding tours of establishment, by discussing client needs or treatment, and by instructing specific therapy techniques.

Performs related duties: Verifies purchase orders, estimates time required to deplete supplies, designs and allocates storage space, and determines methods of storage in order to maintain equipment, materials, and supplies of unit. May compile statistics for research project or for program planning for consultee agency by tabulating data, interviewing clients or others and completing forms to record and convey data to research team or consultant.

Receives instruction during in-service training and continuing education by attending conferences, seminars, and training sessions.

May promote overall establishment program by performing public relation activities such as speaking to community groups about clients' present and future needs.

May participate in coordinating and establishing programs, policies, and procedures by exchanging views and data in formal and informal conferences. May assist in personal recruitment by informing supervisor of known qualified individuals seeking employment, and by interviewing prospective employees as assigned.

Program Supervision (Occupational Therapist)
(GED Level 5) (079.128)

General Definition: Supervises, coordinates, and implements activities of occupational therapy programs in hospitals, clients' homes and other settings, to habilitate or rehabilitate physically or psychosocially disabled clients:

Establishes goals, policies, standards, and plan of service for occupational therapy unit. Formulates, integrates, and implements occupational therapy policies, procedures, programs, and organizational structure by identifying program needs, applying for funding or support, planning for required personnel, space, and materials to provide for required needs within establishment or community. Organizes and directs services by applying occupational therapy and management principles, work experiences, staff communication, and advisement or directions from administrative and medical personnel.

Assists in planning specific occupational therapy program proposals or research projects by compiling, evaluating, analyzing, integrating, and interpreting data on program and rehabilitation needs. Reviews budget and organizational limitations or problems to plan and implement program or project for establishment or consultee agency. Consults with community agencies (such as state mental health division, public school, and geriatric facilities) to propose and coordinate occupational therapy programs by advising agency representatives in community care facilities of means to identify problems before client institutionalization is necessary, and maintain post-institutionalization care for clients.

Screens and observes referred clients to ascertain suitability for intake and treatment by personal client interview and conferences with other involved parties or referral sources. Evaluates client by reviewing intake data, administering and interpreting tests, and by observing, analyzing, and recording behavior to determine client's abilities or function in order to plan treatment goals and program details and assist in diagnostic procedures. Formulates treatment plan by reviewing client's level of function, conferring with client and family, and determining immediate and long range goals. Schedules clients and assigns cases to staff.

Supervises treatment of client by conferring with client, physicians, staff, or specialists and adapting treatment techniques required by individual situation in order to promote psychosocial function, physical function, developmental, perceptual, cognitive, and motor abilities, adjustment to disability and community orientation.

Analyzes client developmental and perceptual motor function, and determines therapeutic program to stimulate maturation.

Guides behavior of clients' demonstrating psychosocial dysfunction by analyzing data about client, designing opportunities for drive sublimation, planning and facilitating interpersonal and social group sessions,

planning and arranging task or work-oriented group activities, and counselling client to cope with future environment through providing practice with and discussion of application of needed skills in order to promote optimal psychosocial function.

Analyzes data about client to determine, design, and implement therapeutic motor activities that promote or conserve optimal physical function (such as upper extremity prosthetic and orthotic training, therapeutic exercise, activities of daily living) within client disability limits by designing, selecting, evaluating, and directing activities and devices that promote optimal range of motion, strength, endurance, coordination, and independent physical function.

Develops programs to supervise and train client on prevocational basis by planning and arranging skills evaluation and directing procedures that stimulate learning of skills, work tolerances, acceptable work habits, and social skills which prepare clients for vocational training or sheltered workshops.

Informs, counsels, and consults with client's family and other health-care workers to obtain cooperation and continuity in therapy.

Documents evaluation, implementation and integration of treatment or training plan and client progress by analyzing, summarizing, and preparing written and verbal reports to authorities to promote communication, evaluate progress, maintain legal and financial records, and coordinate client services. Attends case conferences with physician and other specialists to discuss and evaluate client's function, progress, and plan for therapy.

Formulates occupational therapy discharge plans to ready client and family for non-establishment care and to provide continuation of treatment goals by discussing plans with client, instructing client, relatives, and other health care workers, and recording progress and recommendations.

Coordinates services by recruiting, selecting, orientating, training, evaluating, or when necessary, dismissing occupational therapy employees, students, and volunteers to meet requirements of client population and establishment. Plans, organizes, coordinates, and directs in-service education and clinical training programs for establishment staff, students, and volunteers by analyzing training needs, formulating educational objectives, determining teaching methods, implementing educational programs, and evaluating staff to satisfy all requirements set by establishment professional association and educational institution.

Performs related duties: Plans and coordinates purchasing of required equipment, materials, and supplies for program needs by reviewing and authorizing purchase requests and by projecting and budgeting future demands of programs. May coordinate data collection and review data surveys concerning health care and services within community to determine

extent of occupational therapy service needs by surveying and conferring with health professionals and community organization representatives. Receives instruction in order to maintain and improve skills and knowledged by participating in in-service or continuing education programs and by reading and reviewing materials related to work. Assists and participates in local, state, or national conferences by planning specific learning experiences, arranging for specialist's instruction, and by leading demonstrations and talks to train health related personnel under program of continuing education.

Program Development (Occupational Therapy Consultant)
(GED Level 6) (079.017)

General Definition: Plans and formulates occupational therapy programs and conducts research projects in order to implement habilitation or rehabilitation programs and expand total knowledge of occupational therapy principles:

Formulates and develops research hypothesis by conferring with specialists, discussing research proposal possibilities, and determining research design, methods, and means of investigation and evaluation. Composes research project proposal. Reviews related research data. Implements research activities with other staff activities. Documents research problem and results by compiling and writing summary or results of study, including supportive data and evaluation of methodology.

Plans and develops occupational therapy program or project proposals by compiling, evaluating, and analyzing data about ongoing program or proposed program, and composing plans to implement and coordinate program or project.

Formulates and coordinates occupational therapy policies and procedures, and determines organizational structure by identifying program needs, applying for financial support, and planning for required facilities, personnel, and materials.

Formulates and coordinates continuing education programs by identifying program needs, planning program, applying for financial support, negotiating for required facilities and personnel, and supervising program implementation.

Performs related duties: May submit reports of research methodology and results for publication or conferences by making application and writing article or paper. May promote services offered by occupational therapy consultant by writing letters and brochures or arranging conferences with consultee. Participates in continuing self education by attending conferences, seminars, and training sessions, by reading and studying materials related to work.

OCCUPATIONAL THERAPY JOB DESCRIPTIONS

Program Support (Occupational Therapy Aide)
(GED Level 3) (355.564)

I Client Services:

Treatment Implementation
- Preparation for Activities
- Client Transportation and Transfer
- Assistance in Treatment
- Developmental and Perceptual Motor Activities
- Psychosocial Activities
- Motor and Self-Care Activities
- Construction of Supportive or Assistive Devices
- General Recreational and Arts and Crafts Activities

Reporting Treatment

II Supportive Activities
- Maintenance of Materials
- Self Education

Program Support

I Client Services

Treatment Implementation: Preparation for Client Activities

The objective is to ready treatment area and materials for client in order to prepare for treatment or training. This is achieved by: 1) reading schedule; 2) arranging daily work plan; 3) conferring with staff; 4) gathering material; 5) constructing needed items; 6) rearranging furniture or equipment.

1. Reads schedule to determine which clients will be treated, time and duration of treatment.
2. Arranges daily work schedule by reviewing treatment instruction and conferring with staff.
3. Gathers material and prepares for daily work schedule by adapting or constructing equipment, splints and slings, by laying out materials for client activity, by arranging furniture according to client dysfunction or group needs.
4. Constructs items for special projects (such as holiday parties, decorations and group games) by collecting materials, by making decorations and prizes and by putting up decorations.
5. Constructs arts and crafts projects to be finished by client or to be used as samples or prizes by drawing, tracing patterns, forming, cutting, attaching materials.

Treatment Implementation: Client Transportation and Transfer

The objective is to assist client to and from treatment or training area in order to assure safe ambulation and transfer. This is accomplished by: 1) assisting or instructing client while transferring from bed to wheelchair or to standing position; 2) pushing wheelchair or assisting client in ambulation; 3) lifting or positioning client when client is unable to do so.

1. Escorts client to and from treatment or training area by instructing or assisting client into wheelchair, assisting client in pushing wheelchair and walking with or assisting client to area.
2. Aids client by supporting or lifting and positioning into and out of bed, wheelchair, stand-in-table, only when client is unable to do so.

Treatment Implementation: Assistance in Treatment

The objective is to treat or train client according to specific instructions in order to assist in treatment program for client. This is achieved by: 1) readying client for treatment; 2) orienting client to treatment area; 3) establishing rapport and explaining task or activity to client; 4) assisting and participating with client in activity completion; 5) assisting client in tidying area, 6) leading group activities.

1. Guides client in room or workshop by touring and explaining kind, location and use of equipment while adapting explanation and method of tour to client's capabilities (such as blindness, wheelchair or walker, severe regression).
2. Readies client for treatment or activity by arranging craft materials or equipment and by positioning client, changing or arranging clothing as directed.
3. Converses and socializes with client, asks client how he is feeling and how he has been getting along since last visit in order to establish rapport with client.
4. Gives client directions by explaining and demonstrating procedures and by providing written directions.
5. Guides individual client participation by observing activities and by aiding and encouraging individual clients.
6. Aids client in cleaning area by helping client store materials and clean work surfaces.
7. Substitutes for supervisor and leads group in his absence for short duration by overseeing activities.

Treatment Implementation: Developmental and Perceptual Motor Activities

The objective is to assist client during specified therapeutic play or learning activities in order to assist in implementing overall developmental and perceptual-motor treatment plan. This is accomplished by: 1) explaining or demonstrating activity to client; 2) encouraging client participation; 3) observing client's performance; 4) setting limits as directed.

1. Assists client during specified play or therapeutic activity by explaining activity to client, observing his performance, praising and encouraging appropriate responses and by varying and limiting activity according to client's attention span in order to assist in implementing activity appropriate to developmental continuum.
2. Demonstrates special learning equipment as assigned (such as balancing ball or board, wheeled pivot/prone board) to stimulate client's perceptual-motor learning according to treatment plan.

Treatment Implementation: Psychosocial Activities

The objective is to assist client in specified group or individual activities to develop client's psychosocial skills by: 1) aiding client in activity; 2) supporting and encouraging client's adaptive behavior.

1. Encourages client to become task and work-oriented by aiding client in specified task-oriented group or individual activity (such as arts and crafts, cooking a meal for other clients, preparing ward decorations, or preparing materials for use by community organizations).

2. Supports and encourages client's adaptive behavior according to treatment plan by encouraging desired behavior, by setting limits when appropriate, by providing opportunities for success experiences, by talking with client concerning his behavior and by suggesting alternate behaviors.

Treatment Implementation: Motor and Self-Care Activities
The objective is to assist client in specified therapeutic motor activities in order to assist implementation of treatment plan. This is done by: 1) leading client in activity or exercise; 2) demonstrating and assisting in activities of daily living; 3) encouraging and supporting client.

1. Leads client in specified therapeutic motor activity (such as weaving on loom, finger exercises and foot-pedaled jig saw).
2. Demonstrates specified activity of daily living by explaining and assisting in activity (such as self-feeding, grooming and dressing).
3. Promotes feelings of self-worth by establishing rapport with client and by encouraging him to care for himself as much as possible.

Treatment Implementation: Supportive or Assistive Devices
The objective is to fabricate, modify or adapt slings, splints and self-help devices as directed in order to assist preparation of orthotic and assistive devices for clients. This is done by sewing, forming and cutting materials and attaching fasteners according to instructions.

1. Adjusts and modifies items (such as pencil holders, built-up paint brushes, headband with pointers and page turners, book holders) by fabricating items to assist client in reading, writing and communicating.
2. Shapes spoons, cuphandles, plates, guards and other eating utensils by bending, forming utensil and wrapping handles.
3. Assists client in reaching and holding activities by adjusting, modifying or fabricating such items as reachers, lapboards, cupholders, ashtrays.
4. Constructs supportive devices (such as footboards, lapboards, cut-out seat boards, posture boards, transfer boards, cut-away boots and safety belts) by cutting, filing and attaching fasteners.
5. Aids client in grooming himself by providing or demonstrating adaption of clothing (such as "velcro" fasteners, shoe fasteners, built-up combs, toothbrushes and long shoe horns).
6. Constructs splints by cutting and shaping, smoothing edges and attaching straps or fasteners according to directions.
7. Fabricates slings by sewing and attaching fasteners according to pattern.

8. Informs supervisor of discomfort and poor fit of splint or sling by observing and reporting white or red pressure spots on client's extremity.

Treatment Implementation: General Recreational and Arts and Crafts Activities

The objective is to implement general recreational and arts and crafts activities in facilities (such as nursing homes, homes for crippled children, general and psychiatric hospitals) so that client is assisted in maintaining meaningful social relationships, developing avocational interests and skills and remaining generally alert and interested in environment. This is achieved by: 1) organizing activities; 2) gathering clients together; 3) leading activities; 4) aiding and encouraging individual client participation.

1. Persuades client to participate by conversing with client and by explaining activities available to him.
2. Assists during or may direct arts and crafts sessions on an individual or group basis in various settings (such as bedside, ward, day-room or workshop) by giving directions, explaining and demonstrating activity and aiding client in project completion.
3. Leads such group activities as card games, music, gardening, singing and such special events as parties, picnics by gathering clients and overseeing client activity.
4. Encourages client participation by demonstrating activity and by aiding and helping individual client during activity.
5. May entertain clients by securing films and operating projector or by assisting volunteer entertainers (such as song fests, magic shows, lecturers and parties).

Treatment Implementation: Reporting Treatment

The objective is to inform staff and to receive instructions in order to implement client treatment plan. This is accomplished by: 1) recording attendance; 2) reporting verbally on client activity, behavior and skills; 3) receiving advice and instruction during meetings with supervisor and treatment team.

1. Reports attendance by tabulating numbers of clients, names and times attended and by posting data according to established procedures.
2. Completes accident or incident reports by following prescribed establishment procedures.
3. Exchanges information with supervisor and receives directions concerning client activity in treatment or training by observing and reporting client activity, behavior and skills and by conferring with supervisor to determine future activities.
4. Exchanges information concerning client with other staff by overseeing and reporting client behavior and by attending meetings in which client's treatment program is discussed.

II Supportive Activities

Maintenance of Materials, Equipment and Supplies
The objective is to maintain occupational therapy work areas to assist in maintaining functioning level of materials. This is accomplished by: 1) cleaning, transporting, storing and visually inspecting materials, equipment and supplies; 2) following instructions of superiors and establishment procedures.

1. Checks daily availability of supplies and materials by listing materials as used and by observing remaining supplies.
2. Informs supervisor of status of materials, equipment and supplies by notifying supervisor of materials in low supply or equipment needing repair.
3. Disinfects materials or equipment (such as mats, toys and adapted utensils) which might carry organisms harmful to client by washing or wiping items in appropriate solution, by exposing items to heat or light, or by carrying items to sterilization service to be disinfected.
4. Positions materials and equipment by hand in appropriate place by moving or transporting or by guiding others in positioning in desired location.
5. Stores incoming supplies by determining appropriate methods and place, by labeling storage areas, unpacking and storing supplies according to established procedures and safety regulations.
6. Revises and cleans storage area periodically by removing materials, cleaning shelves and materials, replacing according to use, accessability and size, by disposing of unneeded items and by following established procedures.

Self Education
The objective is to receive instruction and exchange information to up-grade job knowledge and to keep abreast of developments in field by participating in educational programs.

1. Receives instruction bv attending conferences, lectures and meetings.
2. Exchanges information concerning techniques and methods by participating in on-the-job or continuing education training.
3. Receives instruction during individual instructional or counseling sessions with supervisor by exchanging information, by discussing methods, problems and personal work-skills with supervisor.
4. Receives instruction by reading and studying manuals and instructions concerning techniques and methods related to work.

OCCUPATIONAL THERAPY JOB DESCRIPTIONS

Program Implementation (Occupational Therapy Technician)
(GED Level 4) (079.238)

I Client Services:

- Intake
- Evaluation
- Activities Planning
- Treatment Implementation:
  - Treatment Plan
  - Developmental and Perceptual-Motor Activities
  - Psychosocial Activities
  - Therapeutic Motor Activities
  - Prevocational Activities
  - General Activities Program
  - Family and Community Participation
- Treatment Records
- Implementation of Termination of Services

II Supportive Activities:

- Participation in Program Planning and Coordination
- Materials Implementation
- Personnel Recruitment Assistance
- Education:
  - Self Education
  - In-Service and Continuing Education
- Public Information
- Research Assistance
- Consultant Assistance

Program Implementation

I Client Services

Intake

The objective is to gather pertinent client intake data for the purpose of obtaining information concerning client background and problem. This is accomplished by: 1) conferring with staff and supervisor; 2) reading available data concerning client (such as charts, records, referrals); 3) conversing with client.

1. Confers with staff or supervisor by exchanging information on client's background, referral and evaluation needs.
2. Gathers information from charts, records and referral forms by reading and noting data pertinent to occupational therapy.
3. Confers with client by talking and exchanging information with him to obtain information concerning interests, hobbies and needs.

Client Evaluation

The goal is to test client's abilities in order to convey information for treatment planning by: 1) conducting assigned standard tests or evaluation checklists; 2) recording test results.

1. Greets client and gives direction in testing procedures to establish rapport and to explain reasons for test.
2. Administers tests or evaluations by conducting standard test procedures or checklist evaluation procedure according to directions and by guiding performance in evaluations (such as active joint range evaluations, coordination and hand dominance, activities of daily living, homemaking, interest checklists, behavior checklists and worker task evaluations).
3. Enters evaluation results on prepared form by posting test results or entering evaluation data.

Activities Planning

The objective is to plan and arrange activities to implement treatment plan. This is accomplished by: 1) reviewing treatment goals or plans; 2) exchanging information with client and staff; 3) selecting methods and activities to meet client needs.

1. Confers with adult or child's family by exchanging information concerning client activity preferences, activities which will help him and those which are available.
2. Selects activities by comparing treatment plan with client preferences and needs and determining specific activity.
3. Receives direction in planning by conferring with staff concerning client's activities and by exchanging information concerning activity choice and client's perference.

Treatment Implementation of Treatment Plan

The objective is to treat or train client according to devised plan to meet therapy goals. This can be done by: 1) applying and adapting plan; 2) conferring with staff for guidance; 3) modifying activities to specific situation.

1. Schedules client treatment or training by reviewing availability of client and staff times, by checking available facilities, client location, travel time, and by verifying schedules' workability with client and staff in order to coordinate client services.
2. Manipulates materials in preparation for treatment by collecting materials, equipment and supplies, by cutting and forming materials, by operating machines (such as kiln, small and large power tools
3. May escort client to and from treatment area or gather clients together by pushing wheelchair or assisting client when other personnel are not available.
4. Informs client of treatment procedures and goals by explaining them to client in terms he can understand.
5. Persuades client to participate by encouraging and helping during group activities and by participating in activities with client.
6. Guides client in modifying inappropriate behavior by such methods as: 1) observing individuals for signs of on-coming frustration and misbehavior, 2) diverting attention, 3) offering energy-releasing activities, 4) withdrawing attention from individual, 5) requesting assistance from another staff member, 6) removing individual from group when behavior is not acceptable or relocating client in another group or 7) confronting client and discussing behavior with client and 8) suggesting, within client's ability, alternate behaviors that are more socially acceptable and would meet client needs.
7. Directs client in project completion by observing and guiding work, by praising and encouraging good work, and by supervising client as indicated by his current ability to perform activity.
8. Teaches client to perform activity by instructing and demonstrating each step and by adapting instructions to client's capabilities.
9. Plans for continuing activity in client's home by conferring with client and his relatives, by providing materials, and by explaining and demonstrating what is to be done.
10. Suggests remedial action for difficult or previously undetected client problems by observing problem to recognize difficulty, by arranging for consultation with staff or supervisor, and by explaining alternative solutions to client.
11. Verifies client problem(s) and kind(s) of treatment or training required by discussing client's treatment plan and techniques with staff supervisor.
12. Modifies techniques and work steps within the framework of selected activity that will assist client in goals achievement by selecting skills, tools and materials and by examining abilities required in skills and client's capabilities and temperament.
13. Re-evaluates client during treatment or training sessions by reviewing physical and psychosocial skills and progress and by verifying progress on prepared forms.

14. Modifies planned treatment by reviewing nature of new problems, by analyzing what can be done to resolve problem and by consulting with treatment team.
15. Exchanges information with other involved health professionals about client progress in treatment or training through written and verbal communication.
16. Enters information on incident reports as needed by following established procedures.
17. Aids and encourages client to follow therapy instructions by arranging opportunities for adult or child to apply therapy while participating in other activities (such as on the school bus, at home, between therapy sessions) by such methods as: 1) games that require client to use or control parts of body, 2) talking and singing with client in a manner that will elicit desired speech patterns, 3) reminding client of desired behavior either verbally or by touching body part, and 4) holding or supporting client in desired positions.
18. May supervise therapy sessions as substitute during supervisor's absences by directing group activities.
19. May implement treatment in home setting by visiting client in his home.
20. Studies materials related to client's problem by reading and reviewing texts, periodicals, and manuals to increase understanding of client's problem and to find improved methods of treatment or training.

Treatment Implementation: Developmental and Perceptual-Motor Activities
The objective is to guide and encourage clients who demonstrate developmental or perceptual-motor lags in order to inhibit primitive developmental responses and to facilitate higher level maturation. This is achieved by: 1) following treatment plan; 2) arranging activities typical of normal developmental continuum and appropraite to client's developmental lag; 3) demonstrating and explaining activities; 4) guiding and encouraging behavior modification.

1. Arranges activities typical of normal neuro-muscular developmental continuum which appeal to the client by planning routine developmental progression of difficulty and complexity, by demonstrating, guiding and assisting client in activities (such as large muscle games that require creeping, balancing, running, jumping; small muscle games that require manipulation and placement; crafts and toys that require manipulation and coordination) in order to encourage client's development of postural reactions and reflex motor, perceptual motor, gross and fine motor skills.
2. Arranges activities which are typical of normal cognitive developmental continuum and which appeal to client by planning activities appropriate to client's cognitive skills, by guiding client and demonstrating activities (such as games that require discrimination of same/different, numbers, near/far; recognition of body parts; crafts that require one to several steps; construction toys, games

that require memory and use of rules; science projects) in order to encourage client's conceptual development.

3. Arranges activities which are typical of normal emotional and social developmental continuum and which appeal to client by planning activities appropriate to client's emotional and social needs by encouraging client in activities (such as imaginative play, creative arts and crafts, dramatic skits, parallel play, group activities, sharing games, team games, group discussions) in order to stimulate skills in self-expression and interpersonal relationships.
4. Guides client in developing perceptual recognition and discrimination by directing activities according to treatment plan, by reporting client responses and by conferring with supervisor to increase difficulty of activity as dysfunction decreases.
5. Arranges activities to enhance comprehension of basic concepts and commands by assembling groups and using simple commands (such as, "come", "walk with me", "go under the table") and by demonstrating and rewarding acceptable responses.
6. Arranges group or individual play, craft or recreation sessions for client in hospital or institution by planning activities appropriate to client's level and by encouraging and assisting each client to participate at his developmental level in order to aid client's adjustment to institutional environment and continuance of normal developmental patterns.
7. Arranges activities for bed-fast client by planning safe, clean activities appropriate to client's developmental level and interests and by treating client at bedside.

Treatment Implementation: Psychosocial Activities

The objective is to guide behavior of client who demonstrates psychosocial dysfunction so that specific treatment goals are achieved. This can be done by: 1) conferring with staff and client; 2) arranging therapeutic activities and opportunities as directed; 3) acting as group catalyst in social situations; 4) arranging and encouraging client in task-oriented group or individual activities; 5) providing opportunities for client to practice and discuss personal and social skills; 6) conferring with staff on continuing activity outside treatment setting.

1. Exchanges information to determine appropriate activities or experiences for client by conferring with supervisor, treatment team and client.
2. Gains information and understanding of client's problem by studying material related to that problem and by observing client on ward or in other action setting.
3. Arranges creative or self-expressive activities as assigned by suggesting to client selected activities which will meet his conscious and unconscious needs and by instructing and demonstrating activities (such as structured and unstructured activities, creative or compulsive activities, active or sedentary activities, solitary or group activities, gratifying or menial activities) by arranging social group activities.

4. Aids client in developing interpersonal social skills by arranging social group activities, by acting as a group catalyst, by participating in client task groups, by encouraging clients to discuss project and to interrelate with other group members and by facilitating group discussions that are problem or job-related.
5. Implements task-oriented group of individual sessions by arranging sessions, by instructing and demonstrating activities (such as arts and crafts, printing, woodwork and gardening) and by exchanging information with client concerning his skills, feelings and attitudes.
6. Implements client's work-oriented group sessions (such as cooking a meal for other clients, preparing a ward newspaper, preparing materials for use by community organizations) by arranging group times and places, by facilitating group activities and by encouraging individual client participation.
7. Aids client in modifying behavior by analyzing the immediate situation and by selecting and implementing appropriate therapeutic techniques (such as encouraging appropriate behavior, ignoring inappropriate behavior when possible, setting limits, confronting and discussing with client his behavior, his feelings and possible alternative behaviors).
8. Implements opportunities for client to practice skills needed in his expected environment after leaving hospital by directing client in activities (such as grooming, cooking, public transportation practice job interviews) and by discussing with client how he will use these activities after leaving institution.
9. Implements client's planning of recreational activities by arranging client planning group sessions, by encouraging each client to participate in planning and by assisting clients in implementing recreational activities.
10. Implements client's activities in community by assisting him in making contacts outside establishment and by encouraging and supporting his activities (such as family visits, making gifts for family or shut-ins, working for community service groups, joining clubs or social groups).
11. Continously gathers information concerning client behavior by observing client's characteristic way of behaving, by noting appearance and physical condition, by reporting client skills (such as inter-personal skills, ability to solve problems, ability to accept responsibility).
12. Implements changes in treatment program by reporting information concerning client behavior to supervisor and treatment team, by exchanging information concerning needed changes, by conferring with client about activity preferences within his treatment goals and by arranging changes as directed.
13. Implements continuing therapy program outside in-hospital setting by arranging day care activities as directed.

Treatment Implementation: Therapeutic Motor Activities

The objectives are to implement specific therapeutic motor activities

and to construct orthotic and assistive devices as directed in order to aid client in conserving or achieving optimal independent physical function. These goals are accomplished by: 1) conferring with staff; 2) planning routine motor activity progression; 3) demonstrating and leading activities or exercises; 4) constructing devices; 5) instructing client in activities of daily living and use of assistive devices.

1. Selects a routine progression of motor activities (such as gross to fine, light to heavy weight, frequency and time) of physically disabled clients by reviewing treatment plan, by conferring with staff and by analyzing activities to improve strength, range of motion, coordination and endurance.
2. Guides client in activities to optimize strength, endurance, range of motion and coordination by instructing client in activity, by observing and by coaching performance to obtain desired motion.
3. Exchanges information with staff and supervisor to determine type and design of appropriate splint, if needed, by conferring and receiving specific directions for fabrication.
4. Fabricates splints or slings as directed by measuring extremity, tracing pattern, gathering materials, manipulating materials to form splint and by attaching fasteners according to splint design.
5. Modifies, adjusts or fabricates body supports or controls as needed (such as cut-away boots, safety belts, foot or seat boards) by cutting, filing or forming items as directed and by attaching fasteners.
6. Informs, as directed, client, relatives and other involved health care workers in proper usage, limitations and precuations of splints, slings and body supports or controls by discussing and making notations in client records.
7. Observes and reports client's use of splint by watching for white or red pressure spots, effective utilization of splint and exchanging information with staff.
8. Selects and guides motor activities of client restricted to mechanical sustainers (such as respirators or dialysis units) by determining appropriate activities with client and by instructing client in activities to encourage use of uninvolved body parts and maintain physical capacities within client's limitations.
9. Selects and guides motor activities of acutely ill clients (such as those with cardiac, respiratory, or gastrointestinal involvements) by conferring with staff and client, by planning activities within the physical capacities and interests of client, and by instructing client in activity in order to conserve optimal physical function within client limitations.
10. Observes client in his home environment by visiting client and gathering information concerning client's physical independence or self-care skills in order to clarify and identify client problems.
11. Examines and tests client's prosthetic device by conducting standard prosthetic check-out procedure and conferring with prosthetist if device does not fit or function properly.

12. Coaches client in mechanical usage of prosthetic device by conducting functional training (such as wrapping stump, putting on and removing device), by naming parts and by demonstrating and guiding practice of basic movements of device (such as flexion and extention of elbow unit, opening and closing of terminal device).
13. Trains client in use of device by presenting problem-solving situations that may later by used in daily life (such as stacking various sized blocks, handling money, carrying paper cup, cutting food).
14. Instructs client in methods of self-care (such as dressing, grooming, self-feeding, handling money) by demonstrating activity, by suggesting and demonstrating substitute motions and assistive devices and by observing client practice and suggesting alternate methods when needed.
15. Persuades client to want to care for himself and promotes feelings of self-worth by establishing rapport with client and by encouraging him to care for himself as much as possible.
16. Instructs client in methods of homemaking and child care tasks by demonstrating tasks (such as cooking and cleaning, feeding and bathing child), by demonstrating principles of work simplification, by suggesting substitute motion and assistive devices, and by observing client practice and suggesting alternate methods.
17. Reinforces and may instruct in methods of transfer and mobility by demonstrating and coaching in methods of transfer (such as wheelchair to toilet, bed to wheelchair, opening doors) and mobility (such as moving over curbs, taking a bus, getting into a car), by suggesting substitute motions and by demonstrating assistive devices.
18. Instructs client in developing written and oral communication skills by demonstrating and guiding practice (such as handwriting, typing and use of telephone), by suggesting substitute body or hand motions and by demonstrating assistive devices.
19. Informs client of available self-help devices by providing examples and suggesting sources of self-help or labor-saving devices.
20.. Modifies, adjusts or fabricates self-help or assistive devices (such as built-up spoons, cupholders, plate guards, transfer boards, lap boards) by cutting and forming materials, wrapping tape, attaching handles or fasteners.
21. Trains disabled client in driver education by 1) selecting and ordering special equipment, if needed, 2) observing and evaluating client's ability to operate automobile safely and 3) coaching client in driving skills.
22. Implements activity change by observing and reporting client's improved or deteriorated motor skills, by conferring with treatment team and client and by adjusting or changing activity.

Treatment Implementation: Prevocational Activities

The objective is to train client on prevocational basis as directed to enable client to become employable in sheltered setting or to

prepare for vocational training. This is achieved by: 1) evaluating work potential (such as observing work habits and testing in work tolerance level and basic work skills); 2) teaching skills and supervising practice.

1. Plans for teaching selected activities by developing appropriate elementary step-by-step procedures to demonstrate, explain and teach activities to client.
2. Guides home-bound client in developing prevocational and vocational skills by visiting and interviewing clients, assigning remunerative activities, instructing and demonstrating appropriate precedures.
3. Guides client to initiate simplified workshop activity by 1) planning training program with client, 2) assigning a work station, 3) describing and demonstrating equipment, 4) coaching and observing procedural steps and 5) setting up correct sequence of performance of activity.
4. Implements client's overall program by 1) conferring with supervisory staff concerning client's personal and vocational adjustments as related to therapeutic goals and 2) coordinating client's scheduled activities within work schedule.
5. Trains client in good work habits and guides personal-social adjustment by observing performance and encouraging client to work toward minimal supervision, by monitoring client to correct behavior or interpersonal problems, by directing client to be prompt and neat, and by recommending benefits (such as incentive pay rasies, increased job responsibilities, decreased supervision).
6. May implement out-of-establishment training by scheduling client in appropriate job placement for therapeutic purposes, by observing regularly and reporting client's behavior and degree of success on job.

Treatment Implementation: General Activities Programs

The objective is to organize and implement general recreational and art and craft programs in facilties (such as nursing homes, homes of for crippled children, general and psychiatric hospitals) to assist client in maintaining meaningful social relationships, developing regarding avocational interests and adjusting to increased leisure time. This is done by: 1) reviewing activity program recommendations; 2) conferring with client and staff; 3) planning, arranging and scheduling arts and crafts or recreational sessions; 4) coordinating programs; 5) teaching, assisting or overseeing clients; 6) directing staff to assist clients.

1. Examines activity needs of clients by reviewing overall activity program recommendations and by conferring with clients and staff.
2. Plans activity sessions by determining specific kinds of activities to be offered according to recommendations (such as arts and crafts, recreational games, parties, entertainment, group discussions, remunerative activities or community services).

3. Arranges activity sessions by conferring with or writing requests to staff to obtain needed facilities, materials and space, by scheduling activities, and by notifying clients of activities available.
4. Plans for teaching art or craft activities by developing appropriate step-by-step directions to meet client's need.
5. Persuades client to participate by explaining purposes and benefits in terms he can understand.
6. Directs arts and crafts sessions on individual or group basis by supervising overall group or by directing staff in group supervision.
7. Teaches client to perform activity by demonstrating and assisting each step and adapting directions to client's capabilities as activity is performed.
8. Guides project completion by observing, encouraging or praising good work and by assisting or correcting as client's current status indicates.
9. Plans and implements client's home art or craft activities by discussing possibilities with client, by determining and assigning activity, and by giving client directions in project completion.
10. Arranges rewarding or remunerative activities for client by planning and assisting client in activities (such as making gifts for relatives and shut-ins, making art or craft objects to be sold) in order to help client maintain self-esteem.
11. Implements or directs group, social or recreational activities (such as card games, group field trips, dances, group sings, parties) by gathering clients together, persuading and encouraging clients to participate, and by assisting or directing staff to assist clients as needed in order to provide social stimulation for clients unable to plan their own recreation.
12. May coordinate and arrange details of social activities planned by clients by 1) scheduling meeting place, 2) reporting to client pertinent information concerning client planning for programs or events, and 3) making arrangements to implement group's plan (such as scheduling kitchen facilities, making reservation, arranging for travel).
13. Coordinates and initiates overall group direction for clients community service programs by suggesting or directing clients service projects (such as toys for pre-school program, tray favors for shut-ins) and by notifying community agencies of available client services.
14. Monitors and stiumlates social interaction of social groups by stimulating discussions to provide psychological support and aid in problem solving.

Treatment Implementation: Family and Community Participation

The objective is to inform, instruct and confer with client's relatives, guardians or other health care workers in home, community or establishment in order to maintain continuity of treatment or training programs.

This is done by: 1) writing periodic reports; 2) demonstrating methods and use of equipment; 3) discussing client's capabilities and problems.

1. Informs client's family and other health care workers of client progress by written and oral reports.
2. Exchanges information with client's family and other health care workers concerned with client by discussing client's behavior and capabilities, by discussing client's treatment plan and activities in order to gain cooperation in therapy.
3. Instructs and aids client, his family, and other health care workers to continue activities outside therapy sessions by 1) explaining reasons for activity, 2) demonstrating procedures, 3) watching client, relative or worker perform and 4) repeating practice until performance is adequate in order to gain carry-over of therapy.
4. Suggests special services for home-bound clients by exchanging information with social services or volunteer services to arrange provision of services, (such as "talking books", reading to the blind, tutoring, "Meals on Wheels", shopping), by community agencies and volunteers.

Treatment Implementation: Treatment Reporting

The objective is to document evaluation results, treatment or training implementation and client progress in order to promote communication, to evaluate progress and to maintain legal and financial documentation. This is accomplished by: 1) recording data; 2) writing and distributing reports; 3) reporting verbally.

1. Compiles information at regular specified intervals concerning behavioral observation, client participation and client achievement by preparing checklists, routine narrative reports and information from other staff or volunteers.
2. Exchanges information concerning client status with supervisor or during staff or team meetings by discussing treatment plan, treatment implementation and client progress and by receiving advice, direction or assistance.
3. Exchanges information from other agencies or services with staff, by means of participation in meetings, reports and suggestions, to coordinate services for clients who are scheduled in two different agencies concurrently.
4. Exchanges information and receives guidance or services from client's referring physician by appraising physician of client status from recorded information and incorporating advice in client treatment plan.

Termination and Follow-Up

The objective is to recommend termination of services and to assist in formulation and implementation of client's discharge plans so as to provide for continuation of treatment goals. This is achieved by:

1) recording progress and making future recommendations on client's record; 2) discussing client's progress with client; 3) suggesting termination plans to staff; 4) readying client for discharge, according to termination plans.

1. Exchanges client's discharge information with supervisor by suggesting possible discharge plans.
2. Informs client of availability of continuing care by explaining follow-up services.
3. Confers with client's family by exchanging information and planning post-discharge activities to insure continuance of treatment goals.
4. Informs client's family and other health care workers about client's equipment and material requirements by showing catalogs or examples describing equipment and materials, measurements, quantities and costs.

II Supportive Activities

Participation in Program Planning and Coordination
The objective is to exchange information concerning establishment policies and procedures in order to participate in coordinating and establishing program, policies and procedures. This is achieved by exchanging views and data in formal and informal conferences.

1. Exchanges information during occupational therapy staff meetings concerning overall establishment procedures by suggesting procedural changes, by receiving instruction concerning new policies and procedures to be implemented.
2. Exchanges written and verbal information with establishment staff by completing opinion questionnaires or reports as requested and by attending assigned staff meetings.

Program Implementation: Materials, Equipment and Supplies
The purpose is to implement maintenance of equipment, materials and supplies to maintain functional operating level of equipment, materials and supplies of occupational therapy unit. This is achieved by: 1) verifying purchase orders; 2) estimating time required to deplete supplies; 3) designing and allocating storage space; 4) determining methods of storage; 5) checking equipment and requesting necessary repairs; 6) requesting purchase of needed supplies.

1. Verifies purchase order by inventorying incoming equipment, materials and supplies and by checking them against purchase order form.
2. Establishes reorder points by estimating length of time required to exhaust current supplies.
3. Arranges storage by allocating use of storage space according to client dysfunction, frequency and sequence of use, and size of materials.

4. Directs staff in storage of incoming materials by determining appropriate method and place and by directing unpacking and storage according to establishment procedures and safety regulations.
5. May inventory and store equipment and supplies.
6. Checks equipment to insure proper operation and by periodically examining equipment and submitting repair forms when necessary.
7. Recommends purchase of depleted materials and supplies and repair of damaged equipment by notifying supervisor or by completing requisition forms and submitting forms for approval.

Personnel Recruitment

The objective is to gather information for personnel recruitment to help maintain occupational therapy staff and services. This is done by: 1) informing supervisor of known qualified individuals who are seeking employment; 2) interviewing assigned prospective employees.

1. Informs supervisor of known qualified individuals by referring applicants to supervisor or by exchanging information with supervisor concerning recruitment possibilities.
2. Aids in recruitment of applicants by posting notices in publications, by initiating phone calls, by initiating personal contacts, by notifying local professional organizations and by notifying personnel department of staff vacancies.
3. Interviews job applicants by talking with applicants, by recording information (such as job experience, education, training, physical and personal qualifications) and by checking references.

Self Education

The objective is to receive instruction and exchange information in order to improve basic job knowledge and skills by participating in continuing eudcation programs at conferences, seminars and training sessions and by reading and reviewing materials related to work.

1. Receives instruction during continuing education lectures, seminars and workshops by listening to lectures, by discussing aspects of client care and by participating in demonstration or practice sessions.
2. Receives instruction during individual instructional or counseling sessions with supervisor by exchanging information, by discussing techniques, problems and personal work skills with supervisor.
3. Receives instruction by reading and studying texts, periodicals and manuals related to pathologies, treatment techniques and methods.

In-Service and Continuing Education

The objective is to orient and train assigned staff, students and volunteers and conference or workshop groups in order to assist personnel training and continuing education. This is done by:

1) conducting establishment tours; 2) discussing general client needs or treatment; 3) demonstrating and discussing specific techniques.

1. Orients assigned volunteers, students and staff by touring establishment, by referring to training manual and audio-visual aids, by explaining client's disabilities and needs and by demonstrating and discussing general methods and techniques of client treatment or training.
2. Compiles data and suggests material for training manuals and audio-visual aids by accumulating suggestions from volunteers, students and staff and by exchanging information with supervisors.
3. Exchanges information during staff meetings concerning volunteer, staff and student training by making suggestions for innovations and changes and by receiving directions for participation in training.
4. Suggests activities to volunteers on-the-job by advising volunteers of activities and general recommendations for client treatment.
5. Exchanges information with staff on an individual basis by discussing specific activity techniques or methods and by advising staff members concerning alternate activity methods.
6. Trains staff and workshop groups in specific techniques (such as art and craft methods, play experiences or activities of daily living training) by explaining, discussing and demonstrating techniques.

Public Information

The objective is to promote overall establishment and occupational therapy services to lay groups as directed, to inform community of client needs and to enhance occupational therapy programs. This is done by: 1) participating in public relations projects and programs; 2) giving talks at meetings; 3) conducting tours; 4) explaining on-going activities.

1. Collects information by compiling narrative and statistical information needed in public relations projects (such as career day program and open house).
2. Exchanges information during special project committee meetings by suggesting public relations programs and by receiving direction.
3. Implements special programs (such as open house, craft show, and Christmas program) by completing specific responsibilities as assigned.
4. Familiarizes lay groups and individuals with establishment and occupational therapy services by conducting tours and explaining on-going activities and by demonstrating techniques of working with client.
5. Exchanges information about establishment programs and client needs by speaking to interested professional and lay groups at their meetings.

Research Assistance

The objective is to compile data for research projects as directed in order to record and convey data to research team by gathering, noting and posting data and completing forms to record information.

1. Gathers specific data as directed during daily work activities by noting pertinent items, by interviewing clients or by surveying records.
2. Posts specific data as directed by noting and tabulating required data.
3. Records data on appropriate forms by entering data according to established procedures.

Consultation Assistance

The objective is to collect data as directed, to assist in activities program planning for consultee agency. This is accomplished by: 1) surveying clients and facility; 2) gathering data; 3) compiling data to advise consultant concerning health care facility.

1. Surveys facility by touring facility and examining records to determine extent of need (such as number, age, and type of clients requiring activities).
2. Gathers data concerning specific facility by surveying programs, facilities and budget limitations of prospective client agency.
3. Surveys clients by interviewing individual clients to determine activity and interest patterns of each client and degree of overall interest in specific activities.
4. Gathers information concerning monetary limitations on proposed program by inquiring as to amount of funds available for activity program.
5. Plans billing, collection, accounting, and payroll procedures by conferring with consultee agency and informing consultant.
6. May explain goals, facilities and available staff services to prospective consultee agencies by circulating brochures, writing letters, phoning or arranging for conferences with agency staff to inform prospective consultees of available services.

OCCUPATIONAL THERAPY JOB DESCRIPTION

Program Supervision (Occupational Therapist)
(GED Level 5) (079.128)

I Client Services:

- Intake
- Client Evaluation
- Treatment Planning
- Treatment Implementation and Coordination
  - Supervision of staff implementation
  - Developmental and perceptual motor function
  - Psychosocial function
  - Physical function
  - Prevocational training
  - Client's family and community
- Treatment Records
- Termination and Follow-Up

II Supportive Activities:

- Program Coordination
- Program Management
- Personnel Management
- Program Reporting
- Self Education
- In-Service Education
- Clinical Education
- Volunteer Training
- Continuing Education
- Public Information
- Research
- Preventive Health Consultation
- Activities Program Planning for Consultee Agency
- Consultee Agency Staff Training
- Continuing Consultation
- Data Collection for Consultee Program Planning

Program Supervision (Occupational Therapist)

I Client Services

Intake

The objective is to screen and observe referred client for the purpose of determining suitability for intake evaluation and treatment. This is accomplished by: 1) personal client interview; 2) conferring with other involved parties; 3) obtaining intake information from various referral sources.

1. Reviews all available information about client by assembling and noting pertinent information.
2. Obtains information necessary to determine suitability for entrance into occupational therapy services by conferring with other involved personnel, by interviewing client and family or by observing trial placement.
3. Determines suitability of client to therapy services by estimating whether or not occupational therapy evaluation is warranted.
4. May assist in determining client's suitability to overall establishment services by conferring with other professionals during intake or admission conferences.

Client Evaluation

The objective is to evaluate referred client in order to plan treatment programs and to assist in overall diagnostic procedures. Methods of achieving this objective include: 1) reviewing intake information; 2) selecting evaluation procedures; 3) administering or directing, interpreting and recording tests; 4) observing, analyzing and recording behavior to determine client's abilities and level of function.

1. Selects appropriate evaluation methods by reviewing intake data and determining appropriate tests or measures.
2. Assigns specific evaluation methods to other staff.
3. Puts client at ease by conversing with adult or playing with child.
4. Instructs client in evaluation procedure to be followed by explaining or demonstrating task.
5. Administers tests and evaluations for physical and psychosocial function, such as:
   a. Conducts functional muscle tests by feeling for abnormal muscle tone, observing for muscle development, testing functional strength of muscle groups, determining degree of muscle strength.
   b. Administers active or passive joint range of motion measurement by positioning goinometer and reading maximum joint range as appropriate for determination and evaluation of occupational therapy procedures.

c. Administers tests for reflex-motor development and postural-balance reaction development by conducting standardized developmental measurements with client.
d. Administers tests of perception and perceptual-motor functioning by evaluating tactile, proprioceptive, kinesthetic and visual perception, postural reactions, motor planning, eye-hand control and by using standardized test batteries.
e. Tests client's coordination, dexterity, eye-hand coordination and hand dominance by administering standard tests or devices and by observing, timing and recording placement, smoothness, and ease of motion.
f. Evaluates developmental achievements by questioning family, observing and handling client, verifying developmental milestones and conducting standardized developmental measurements.
g. Administers or directs administration of activities of daily living evaluation by presenting sample situations (such as in grooming, feeding, dressing self, ambulation, communication), by observing and timing client's performance and recording results.
h. Administers pre-prosthetic evaluation by interviewing client, by measuring stump and conducting muscle and joint range tests to assist physician and prosthetist in determining upper extremity prosthetic prescription.
i. Analyzes effect of home, physical and emotional surroundings on client's presenting problem and assesses client's ability to manage activities of daily living and homemaking by 1) observing and questioning both client and family concerning client's home environment, 2) observing and timing client's abilities to care for himself, transport himself, and manage home skills and 3) evaluating need for assistive devices and special training.
j. Evaluates work potential by: 1) conducting work sample tests and 2) observing and timing client's ability to perform basic work skills related to many jobs.
k. Appraises referred client formally by presenting other tasks, activities or situations listed on check-lists designed to test physical and psychosocial skills.
l. Evaluates client's interpersonal skills by informally interviewing client to determine client's needs and desires, by observing client to note non-verbal responses and interpersonal reactions and by analyzing and recording interview and observation results.
m. Analyzes referred client's skill levels during testing or evaluation sessions by observing continuity and sequence of performance.
n. Analyzes referred client's levels of physical and psychosocial skills during initial treatment or training sessions by observing reactions, behavior and interest in ongoing activities, level of skill, social and interpersonal relationships.

6. Studies, summarizes and documents client performance during evaluation by writing narrative reports, by comparing client behavior

with norms and by recording test scores or checking evaluation forms.
7. May explain purpose of evaluation, when apporpriate.

Treatment Planning

The objective is to formulate and integrate goals, nature and place of occupational therapy in order to provide treatment or training according to client's developmental, psychosocial and physical needs. This is accomplished by: 1) analyzing intake and evaluation information; 2) reviewing referral and staff recommendations; 3) conferring with client and his family; 4) incorporating information of available facilities and treatment techniques.

1. Sets overall treatment goals by conferring and consulting with other health care personnel.
2. Formulates specific goals by analyzing available information, by discussing goals with client and his family and by considering available programs and facilities.
3. Develops treatment plan by analyzing activity components and by selecting from available activities or methods those appropriate to client's needs and desires.
4. Selects or directs selection of specific project, activity or group activity by 1) asking client what his preferences, hobbies or interests are and providing choices in those areas which also relate to specific psychosocial and physical treatment goals.
5. Documents goals and treatment plans by composing reports to be placed in apporpriate records.

Treatment Implementation and Coordination

The objective is to implement and coordinate client treatment or training in order to obtain planned goals. This is accomplished by 1) following treatment plan; 2) consulting with other specialists to adapt treatment techniques to client's overall program; 3) analyzing client progress, evaluating treatment and modifying plan.

1. Conducts treatment according to previously devised play by following treatment plan and adjusting treatment techniques to current situation to meet treatment goals.
2. Coordinates program with other health care workers by communicating with concerned health professionals or by accompanying client to clinics and conferring with individuals concerned with his care and incorporating the client's therapy into his overall program.
3. Initiates remedial action by recognizing new, difficult or previously undetected problems during therapy, by seeking consultation with other specialists, by conferring with client and his family and by modifying occupational therapy program to include appropriate goal(s) and treatment or training.
4. Reassesses treatment goals by conferring with client and client's health care team.

5. Studies materials related to client problems by reading and reviewing texts, periodicals and manuals to increase understanding of client's problem and to find improved methods of treatment or training.

Treatment Implementation: Supervision of Staff Implementation
The objective is to supervise staff's implementation of treatment or training in establishment, client's home or other setting in order to direct or modify treatment as required and obtain planned goals. This is achieved by giving direction to those responsible for specific treatment or training.

1. Directs staff in client's treatment or training by planning, reviewing and discussing each client's status and progress, by contributing opinion at occupational therapy staff conferences and by making final decision on recommendations.
2. Initiates remedial action for new, difficult or previously undetected problems during therapy by arranging for consultation with other specialists, calling for and presenting problems at occupational therapy staff conferences and modifying occupational therapy program to include appropriate goals and treatment or training.
3. Coordinates client's treatment or training program with health care workers and facilities concerned with client by conferring with client's health care team in meetings, by written and telephone communications and by observing or informing staff to observe client in scheduled treatment facilities and incorporating overall treatment goals into occupational therapy program.

Treatment Implementation: Developmental and Perceptual-Motor Function
The objective is to formulate and implement treatment or training programs for client demonstrating developmental or perceptual-motor lag; the goal is inhibition of primitive developmental responses and facilitation of higher level maturation. This is accomplished by: 1) reviewing and analyzing client's problems; 2) designing opportunities for learning developmental or perceptual-motor skills; 3) guiding (or directing guidance of) client.

1. Designs and implements activities typical of normal neuromuscular developmental continuum, which will appeal to client by planning progressive steps of difficulty and complexity in activity and by guiding client in activities (such as large muscle activity which requires creeping, balancing, running, jumping; small muscle games, crafts and toys which require manipulation, coordination and placement) in order to encourage client's development of postural reactions and reflex-motor, perceptual-motor, gross and fine motor skills.
2. Designs and implements activities typical of normal cognitive developmental continuum which appeal to client at his developmental level by planning a progression of activities, and by guiding

or directing guidance of client in mastery of increasingly difficult concepts.

3. Designs and implements activities typical of normal emotional and social continuum which appeal to client by planning programs and group sessions appropriate to client's social and emotional development, by arranging and coordinating therapeutic activities and play sessions (such as puppets, doll houses, painting, drawing, skits, parallel sandbox play, team games and team group discussions).
4. Guides client in development of perceptual recognition and discrimination by demonstrating and coaching activities and treatment modalities which require responses to tactile, proprioceptive, kinesthetic, vestibular, visual and other stimuli.
5. Plans and arranges for continuity of treatment or training by structuring home activities, by instructing parents or relatives in training procedures and by coordinating treatment or training with other services serving client.
6. Plans for increasing skill levels by analyzing client responses and by increasing difficulty of activity as client dysfunction decreases.
7. Designs and implements group or individual play, craft or recreation programs for clients in hospitals or institutions by planning playroom or bedside programs, by scheduling, directing and monitoring activity programs to aid clients adjustment to institutional environment and continuance or normal developmental patterns.

Treatment Implementation: Psychsocial Function

The objective is to formulate, coordinate and implement a therapeutic plan to guide behavior of clients' demonstrating psychosocial dysfunction in order to achieve optimal independent client function in his social and cultural environment. This is achieved by: 1) analyzing client needs; 2) conferring with treatment team and client; 3) designing opportunities for drive sublimation; 4) arranging task or work-oriented group of individual activities; 5) teaching client to cope with expected environment through providing practice with and discussion of application of needed personal and social skills.

1. Designs opportunities for drive sublimation, expression of feeling and problem-solving skills by analyzing client's needs, by analyzing activity components and suggesting to client suitable tasks which meet his conscious and unconscious needs (such as structured versus unstructured activities, creative versus compulsive activities, physically active versus sedentary activities, rewarding versus unrewarding activities, group versus solitary activities, gratifying versus menial activities).
2. Arranges group and social settings in which client becomes aware of maladaptive behavior patterns and is exposed to socially accepted behavior which will also meet his needs by analyzing client's behavior patterns and applying principles of group dynamics.

3. Guides client to self-constructive expression by planning and arranging task-oriented groups or individual sessions in tasks (such as arts and crafts, printing, woodwork, gardening) by implementing or directing demonstration and instruction and by counseling with client concerning his skills, feelings and attitudes.
4. Coordinates activities for client to develop interpersonal-social skills by assisting client on individual basis, by acting as group catalyst, by arranging client task groups, by encouraging client to form relationships within the group and by facilitating client group discussions that are task, problem or job-related.
5. Guides client to become task and work-oriented by designing an environment in which client may become involved in planning, implementation and completion of a task, (such as cooking a meal for other clients, preparing ward newspaper or preparing materials for use by community organizations).
6. Guides client by evaluating situation and implementing therapeutic interventions to modify behavior such as: 1) encouraging appropriate behavior, 2) ignoring inappropriate behavior when possible, 3) arranging opportunities for peer group pressure to be exercised, 4) setting limits, 5) confronting and discussing with client his behavior and feelings and 6) discussing with client alternative methods of behavior.
7. Guides client in learning to cope with his living environment after he leaves the institution by arranging opportunity to practice skills required in his expected environment and planning with client how he will use these skills when he leaves.
8. Arranges group activities to facilitate client's planning of recreational activities by scheduling client group meetings and discussions concerning client recreation and by assisting client, when necessary, with arranging times, places and facilities according to client plans.
9. Guides client group activities to provide volunteer services (such as hospital volunteers, parties for residents of nursing or children's homes) or goods (such as tray favors or toys for shut-ins or hospitalized patients) from clients to community by scheduling and facilitating group activities and by informing community agencies of client services available.
10. Guides client to maintain his concept of himself as a contributing member of society by encouraging client to initiate or maintain meaningful and constructive contacts outside treatment facility, and by suggesting to him alternatives (such as family visits, groups, joining clubs or social groups).
11. Continuously gathers and analyzes information concerning client behavior by observing client's characteristic way of responding to varied activities, by noting appearance and physical condition, by reviewing such client skills as verbal and non-verbal communication, ability to resolve problems and make or maintain relationships with other in many group settings (such as workshop, ward, park).

12. Analyzes client's behavior and responses by interpreting client statements, actions and art or craft work to treatment team based on knowledge of client's history, pathology and individual dynamics.
13. Reviews and analyzes client's problem and treatment plan by examining client's work, by conferring with treatment team and by observing client in other action settings (such as ward or other therapy setting).
14. Implements change in treatment program by conferring with client, consulting with treatment team and planning and arranging necessary changes to meet client's current needs.
15. Plans and arranges continuing therapy program outside in-hospital setting by conferring with client and treatment team, by implementing referrals or day care program.
16. May treat or train client after discharge in another setting to continue therapy program.

Treatment Implementation: Physical Function

The objective is formulation, design and implementation of therapeutic motor activities and orthotic or assistive devices to establish or conserve optimal independent physical and motor function within client's disability limits. This is accomplished by: 1) analyzing information about client; 2) selecting, evaluating and directing specific motor activities: 3) designing and fitting splints and slings; 4) selecting and adapting self-help devices; 5) training client in use of upper extremity prosthetic devices, splints, slings, self-help devices; 6) training client in management of daily living skills.

1. Explains treatment rationale to client, his family and other health care workers in order to help them understand basic concepts of treatment.
2. Guides client in activities which maintain or increase range of motion by adapting and arranging activities which require client's maximum range and by demonstrating methods and coaching client in activity.
3. Guides client in activities which maintain or increase strength and endurance by analyzing and determining amount of resistance to motion, frequency and length of time of activity and by coaching client in activity.
4. Coaches client in neuromuscular facilitation techniques by inhibiting or stimulating and facilitating motion as indicated by client dysfunction.
5. Modifies materials, adapts equipment and positions work to maintain or improve joint range, resistance to and frequency of motion to inhibit or facilitate motion as indicated by client's function.
6. Guides acutely ill clients (such as cardiac clients) in regaining more normal activity by 1) planning and demonstrating activity according to client's classifications, 2) monitoring client when performing activity and 3) determining and instructing in frequency and duration of activity.

7. Observes and adjusts activity level by increasing or decreasing time, range, resistance and difficulty as client's function improves or deteriorates.
8. Selects and designs splints, slings or other supportive or assistive devices to limit, control or increase motion, prevent deformities, provide support or facilitate voluntary motion by reviewing client need, conferring with physicians or orthotist, designing or adapting devices, fabricating or directing fabrication of device and fitting the device.
9. Instructs or may supervise instruction of client in activities of daily living (such as self-feeding, grooming and transfer or wheelchair mobility), communication skills, homemaking and driver education by explaining and demonstrating techniques to client, by observing performance and suggesting alternative methods as required.
10. Persuades client to want to care for himself and promotes feelings of self-worth by establishing rapport with client, by encouraging him to care for himself as much as possible.
11. Modifies or may design self-help devices by reviewing client need, determining which devices are needed, adapting commercially available device or designing device, fabricating or directing fabrication of device.
12. Trains client in use of splints, slings and self-help devices by instructing or supervising instruction of clients in devices' proper usage, limitations and precautions.
13. Evaluates effectiveness of splints, slings and self-help devices by reviewing client use of device and analyzing its usefulness to client.
14. Trains client in use of prosthetic device by 1) administering evaluation of prosthetic device, 2) conferring with physician or prosthetist if device is not functioning properly, 3) training or directing training of client in mechanical use and wearing of device and 4) instructing or directing instruction of client in using device in daily life.
15. Plans and arranges recreational activities to guide client in adjusting to disability and developing interpersonal skills by reviewing and analyzing client recreational needs, developing recreational programs and coordinating program implementation.
16. Instructs client, his family and other health care workers to continue activity outside therapy sessions by demonstrating procedures, watching client and relative or worker perform and repeat demonstration until performance is adequate.

Treatment Implementation: Prevocational Training

The objective is to develop programs to supervise and train clients on prevocational basis to guide learning skills, work tolerances, acceptable work habits and social skills and to prepare clients for sheltered workshop or vocational training. This is achieved by planning and arranging evaluation and training procedures and directing client training.

1. Adapts or may develop testing and evaluation procedures by reviewing available data concerning desireable worker skills needed in community, by selecting from commercially available testing procedures and adapting tests to client population, or by developing work sample evaluations.
2. Determines feasibility, time and cost factors of new activity for workshop situation by reviewing and analyzing available client skills and needs, budget and space limitations and community needs.
3. Develops training experiences by designing sample job situations in relation to worker opportunities within the community.
4. Directs client's overall prevocational program by conferring with and directing staff.
5. May plan and arrange prevocational training in client's home by organizing and coordinating work training programs and remunerative activities to be implemented in client's home.

Treatment Implementation: Client's Family and Community

The objective is to inform, counsel and consult with client's family and other health care workers in client's home, institution or community for the purpose of obtaining cooperation and continuity in therapy. This is accomplished by: 1) writing periodic reports; 2) discussing client's abilities in relation to his life situation and 3) instructing in treatment methods and use of equipment.

1. Instructs family and health care workers in methods and application of exercises, equipment and activities by demonstrating methods and techniques and by discussing attitudes and behavioral responses to provide for carry-over in therapy.
2. Illustrates and explains client's abilities by 1) describing and interpreting evaluation procedures, 2) inviting client's family and other health care workers to observe or participate in evaluation and treatment sessions, 3) pointing out capabilities as well as disabilities through demonstration and discussion and 4) recommending treatment and home activities.
3. Informs client's family of client progress by written and oral reports.

Treatment Records

The objective is to document client evaluation and treatment or training plan, its implementation integration or treatment and client progress in order to promote communication, evaluate progress maintain legal and financial documentation and coordinate client services, methods include: analyzing, summarizing data and preparing written reports and distributing them or reporting verbally.

1. Compiles information at regular specified intervals concerning behavioral observations, client participation and client achievement by using checklists, narrative reports and information from others, such as assistants or volunteers.

2. Documents and evaluates client's treatment or training progress or lack of progress at specified intervals by writing narrative reports, preparing checklists or transcribing information provided by others.
3. Summarizes client treatment or training and progress by reviewing, correlating, extracting and evaluating pertinent information from data sheets, test forms, checklists and progress reports by writing summaries and completing designated report forms.
4. Exchanges information and receives guidance from referring physician by appraising physician of client status from recorded information and summarizing advice in client treatment plan.
5. Exchanges information at client health care team conferences by verbally reporting client evaluation results, progress, and current status and by receiving information concerning client's other treatment programs.

Termination and Follow-Up

The objective is to formulate discharge plans with client and treatment team in order to provide for continuation of treatment goals. This can be achieved by: 1) readying client for discharge; 2) conferring with treatment team; 3) referring client to appropriate agency or individual; 4) instructing client's relatives and community health care workers; 5) recording progress and recommendations.

1. Recommends discharge or termination by reviewing records of treatment or training and progress attained and noting recommendation in client's record and by conferring with treatment team.
2. Formulates client's discharge plans to be used by client and client's relatives by conferring with client and experts involved in client's care.
3. Analyzes client's equipment needs by reviewing client function and determining description and measurement of equipment.
4. Composes final treatment summary on client and officially terminates occupational therapy program by writing summary or narrative termination report concerning client's program, progress and treatment recommendations.
5. Implements referral of client to specific community activities that will continue client's activity program by conferring with client and other agencies and by following established referral procedures.
6. Confers with client's family and other health care workers concerning post-discharge activities by discussing activity, demonstrating activity and making assignments as needed.

II Supportive Activities

Program Coordination

The objective is to confer with establishment staff by written and verbal communications in order to coordinate occupational therapy

services with other establishment programs. This can be accomplished by: 1) exchanging information during committee and staff meetings; 2) suggesting solutions to problems and sharing in program evaluation process; 3) developing procedures to be implemented by other staff; 4) surveying and ascertaining from other service area what programs are offered, extent of overlap and gaps that need to be closed to fulfill client needs.

1. Communicates in writing and verbally with establishment staff by making suggestions, by participating in problem solving and sharing in establishment evaluation process to assist program and policy formulation.
2. Coordinates occupational therapy programs with other establishment programs (such as recreation, industrial, physical and speech therapy) by surveying and ascertaining from other service areas what programs are offered, the extent of overlap and gaps that need to be filled to fulfill client needs.
3. Coordinates occupational therapy services with other client care services by developing procedures to be implemented by other establishment staff (such as R.N.'s, L.V.N.'s. L.P.N.'s).
4. Exchanges information and ideas by participating in establishment committees (such as Drug Abuse Committee, Safety Committee or special subject meetings such as research, transportation) by prividing and receiving information, sharing ideas and making group recommendations to administrators.

Program Management

The objective is to organize and direct occupational therapy services in order to provide services and materials which meet the needs of client and the goals of the establishment. This objective is accomplished by: 1) applying occupational therapy and management principles and work experiences; 2) exchanging information with occupational therapy staff; 3) applying advice and direction from administrative and medical personnel; 4) supervising, coordinating and implementing activities.

1. Implements occupational therapy service policy and operating objectives and activities by presenting problems, establishing functions and procedures and exchanging information concerning occupational therapy services through conferences with medical and administrative supervisors and through meeting with establishment staff.
2. Directs and coordinates occupational therapy programs by overseeing departmental activities and programs and by supervising and coordinating staff, student and volunteer activities.
3. Directs educational programs by coordinating all teaching activity in occupational therapy service.
4. Examines and integrates nature and frequency of tasks and work loads by reviewing procedures for assigned work area and formulating or changing work assignments.

5. Directs occupational therapy staff meetings to convey policy decisions and procedural plans by exchanging information and by discussing problems and suggestions for change.
6. Identifies new findings and procedures that may be implemented by reviewing professional journals and current literature.
7. Establishes and facilitates procedures (such as client evaluation, progress reporting) by preparing appropriate forms and by instructing in their use.
8. Coordinates special projects (such as holiday parties, decorations, group activities) by assigning staff, students and volunteers and by arranging and budgeting for transportation, supplies and space.
9. Plans and arranges inventory procedures by reviewing services and needs and designing methods of control.
10. Directs staff to maintain supplies, equipment and materials by assigning staff to inventory and control materials and to check equipment for repair.
11. Regulates to control expenditures by reviewing, evaluating requisitions for repairs submitted by staff for compliance with: 1) specified procedures, 2) availability of appropriate funds and 3) justification of request in terms of service requirements.
12. Evaluates need for purchase and estimates utilization of equipment and supplies by conferring with salesman, viewing displays, reviewing catalogs and estimating the budgetary limitations imposed on purchase.
13. Plans and prepares departmental budget statement by analyzing such factors as number and type of clients served, departmental costs, projected workload, plan for new facilities and budget statements from previous years and by submitting proposed budget for approval.
14. Informs establishment of staffing needs by reporting workloads, plans for service and other related information.
15. May plan, organize and direct therapeutic activity program by coordinating, administering and directing the activities of each therapeutic speciality.

Personnel Management

The objective is to coordinate occupational therapy staff to meet needs of client population and establihsment. This is accomplished by recruiting, selecting, orienting, training, supervising and evaluating occupational therapy employees, students and volunteers.

1. Recruits employees by notifying establishment personnel department of openings, by writing letters and initiating phone calls, by initiating personal contact and by notifying local professional organization.
2. Selects new worker by interviewing applicants, by evaluating impressions and data about job experience, education, training, physical and personal qualifications and by reviewing applications and references.

3. Hires worker by setting wages or by using hiring methods developed by establishment.
4. Orients new employees by 1) familiarizing them with client population, 2) explaining treatment or training methods and goals and 3) assigning work to new employees with close supervision initially, increasing case load on graduated basis.
5. Supervises staff by directing activities, by counseling and conferring on an individual or group basis to discuss and resolve work related problems and by making arrangements (such as leave, vacation, change of assignment).
6. Analyzes ways and means of presenting new treatment information to establishment staff by discussion with staff.
7. Plans and arranges continual on-the-job training by explaining and demonstrating or arranging for instruction of new or different treatment or training techniques to staff.
8. Studies and reviews work duties and procedures to develop duty assignments by analyzing available staff hours, work load, client needs, staff skills and abilities.
9. Implements establishment safety regulations by requiring written accident or incident reports, setting up and enforcing safety procedures and theft prevention methods.
10. Coordinates and assigns duties to departmental personnel by using information concerning staff skills, abilities, interests and program data, and by arranging therapy sessions.
11. Coordinates and supervises activity of volunteer workers assigned to occupational therapy service by orienting and training in occupational therapy objectives and methods, by assigning and overseeing activities and by providing assistance and encouragement.
12. Reviews and examines time records to approve work hours, sick or vacation time, overtime and vacation schedules, in accordance with established procedures.
13. Examines criteria for performance evaluation of staff by considering job duties and by using similar work experiences and guidance of personnel experts as a basis for evaluation of occupational therapy staff.
14. Evaluates staff performance by 1) observing work performance, 2) conferring with other staff, 3) reviewing performance of individual evaluation factors and standards, 4) completing evaluation forms, 5) discussing evaluation with employee and 6) obtaining individual's signature and recognition of evaluation findings.
15. Studies and reviews staff personnel records to recommend action by determining justification for promotion, discipline, dismissal or wage change consideration.
16. May control personnel activities and coordinate scheduling of occupational therapy services by contacting staff members who work outside establishment (such as home service therapists, nursing homes, consulting psychiatric clinics) by requesting reports of service time and by assigning duties, dismissing and terminating employees and following establishment procedures.

Program Reporting

The objective is to write activity and service reports and other correspondence in order to conduct business of department, to provide operating data and to maintain required records. Methods include: compiling and analyzing data, composing reports and letters.

1. Writes letters, memos and reports to communicate with other health professionals, community agencies, businesses and professional associations in order to answer and ask questions, request referrals, refer clients, convey information.
2. Reviews, evaluates, approves or suggests changes in correspondence prepared by staff.
3. Composes numerical and narrative monthly, quarterly and annual reports by 1) detailing progress and status of programs and 2) summarizing client activity, staff assignments and changes, staff education during period, professional affiliations and obligations, student training and total teaching involvement during period.
4. Plans and arranges reports of statistical and financial data in order to maintain costs accounting by consulting with appropriate persons and by using information concerning standard bookkeeping and record keeping procedures of establishment.
5. Composes correspondence and reports to comply with establishment policies and regulations by reporting progress, justifying budget and requesting funding.

Self-Education

The objective is to receive instruction and keep abreast of current concepts and practices in order to maintain and improve skills and knowledge. This may be accomplished by attending conferences, seminars and training sessions, by reading and reviewing materials related to work.

1. Receives instruction by attending and participating in conferences, workshops, seminars and training sessions.
2. Studies and reviews literature related to work knowledge and skills by reading and gathering information concerning current concepts and practices.
3. May receive instruction during individual instructional or counseling sessions by exchanging information, discussing treatment principles and techniques, by reviewing problems and personal work skills with supervisor.

In-Service Education

The objective is to plan, organize and direct in-service education as requested for staff and students inorder to conserve and improve staff knowledge, skills and services to clients. This is achieved by: 1) analyzing training needs in relation to specific treatment problems and client needs; 2) formulating educational objectives;

3) determining teaching methods; 4) implementing educational programs.

1. Analyzes need for in-service education by observing skills and abilities of employees, holding discussions in staff meetings and receiving feedback from individuals.
2. Plans training by obtaining information concerning subject matter, staff to be trained, length of training, audio-visual aids and by formulating training objectives and writing outline.
3. Instructs and participates in conducting training programs by presenting lectures, discussing and demonstrating occupational therapy techniques.
4. Evaluates new and routine staff training programs by conferring with medical and administrative directors.
5. Distributes informative data by notifying staff of meetings, conferences, workshops and classes, by communicating new ideas and program information and by distributing new texts, monographs and periodicals.
6. Teaches occupational therapy theory and education principles to university students by lecturing, demonstrating and discussing techniques in the academic setting.

Clinical Education

The objective is to plan, organize, coordinate and administer clinical training programs adapted to student needs and interests in order to satisfy educational requirements set forth by both professional association(s) and educational institution(s). The objective is achieved by: 1) conferring with students regarding training objectives and written assignments; 2) conferring with school and university faculty; 3) planning and arranging for training experiences; 4) preparing student evaluations.

1. Develops clinical training programs for students at various levels of skill and knowledge (such as occupational therapy assistant students, college freshmen, sophomores and juniors in university occupational therapy programs, university seniors in three-month internship and master's degree students) by planning individual student abilities, needs and time.
2. Coordinates student programs and schedules students into educational programs by oral and written communications with affiliated school, university and student.
3. Orients new student to establishment by touring facility and by explaining establishment and occupational therapy policies, procedures and goals.
4. Informs student affiliate by assigning work area and case load, written and special assignments to be completed and lectures and demonstrations to be attended.
5. Supervises student by initially close observation and direction, discussion of student application of occupational therapy theory

to technical skills, client-student relationships and group dynamics.

6. Trains student by explaining and demonstrating use of materials, machines and devices, techniques of evaluation, testing, training or treatment and procedures of recording, reporting, requisitioning.
7. Instructs student of practical and theoretical applications of occupational therapy through lectures and discussions.
8. Counsels student by advising student concerning his ongoing learning and growth.
9. Examines student reports about client evaluation and progress by reviewing, commenting and correcting reports.
10. Evaluates student's special project assignments by reviewing and commenting.
11. Communicates student's general progress to affiliating school or university by written and oral progress reports.
12. Evaluates student's overall performance by conferring with staff concerning a student, by consolidating ratings, by completing appropriate forms, by composing narrative report, by discussing evaluation with student and by sending evaluation report to affiliating school or university.
13. Exchanges information with university facilities concerning educational programs and clinical experience by participating in clinical council meetings of affiliated university.

Volunteer Training

The objective is to plan, organize and conduct training for assigned volunteers to optimize the effectiveness of volunteer services. This is accomplished by: 1) developing orientation programs consisting of tours, discussions and demonstrations; 2) using training manuals and video tapes to inform volunteers about specific client needs; 3) on-the-job instruction.

1. Writes training manuals for volunteers and prepares audio-visual aids by compiling, evaluating and summarizing informational materials.
2. Orients and trains assigned volunteers by touring establishment and by explaining ongoing activities in occupational therapy facilities.
3. Explains client's specific disabilities and needs by using training manual and audio-visual aids and by demonstrating methods and techniques used in client treatment.
4. Instructs volunteers on-the-job by conferring and advising regarding specific aspects of occupational therapy program or client problems, activities and care.

Continuing Education

The objective is to organize and partake in local, state or national conferences to train health-related professionals and to improve personal competence under a program of continuing education. This is accomplished by: 1) arranging and scheduling experts' participation; 2) planning workshops and conference programs; 3) leading demonstrations, discussions and talks.

1. Arranges for workshop or conference by considering needs and requests of professionals, specifying topics, corresponding with experts to gain participation and setting dates.
2. Plans in detail as a member of organizational program committee by discussing and arranging for financial support, space, housing, transportation, cooperation of institutions and other details, by drafting and arranging for printing of materials and by arranging for cooperation of clients and relatives to be used as subjects.
3. Teaches treatment techniques in workshops by lecturing with the use of audio-visual aids and by demonstrating and discussing methods.
4. Trains staff from other establishments by speaking and demonstrating techniques of occupational therapy during workshop sessions sponsored by the establishment.

Public Information

The objective is to inform individuals and groups outside establishment about principles and values of occupational therapy in order to inform public and other agencies concerning establishment and occupational therapy goals and services and to enhance fund-raising opportunities. This is accomplished by: 1) guiding tours; 2) presenting talks; 3) demonstrating techniques.

1. Informs groups and individuals and groups outside establishment and occupational therapy service by guiding tours and explaining ongoing activities.
2. Informs interested groups by speaking at meetings about programs and client needs in the establishment.
3. Participates in various rehabilitation committees by providing information to other services or agencies.
4. Informs physicians and related health services about principles, standards and values of occupational therapy by lecturing and demonstrating occupational therapy methods and techniques.
5. Maintains personal contacts with other service agencies in the community by written and oral communications and by representing establishment at community meetings establishment when establishment is concerned.

Research

The objective is to implement research projects as a team member in order to support or deny current theories and techniques and to develop occupational therapy theories and techniques. This is accomplished by: 1) collaborating to develop hypothesis and research design and to apply for financial assistance; 2) reviewing related research; 3) compiling and recording raw data; 4) collaborating to analyze and record data, and to interpret results of data.

1. Assists in developing a research hypothesis by conferring with specialists, discussing possibilities of questions or areas of study (such as evaluation methodology, effectiveness of treatment techniques, client attitudes toward treatment, treatment

follow-through) and by determining the method and means of investigation and evaluation.
2. Examines, studies and reviews related literature and research reports as requested by compiling data, by analyzing data and interpreting relationships of related information to proposed project.
3. Assists in composing research project proposal by composing and writing assigned part of the proposal in order to apply for financial support for the project.
4. Implements or assists in implementing research program in on-going treatment and educational programs by coordinating research activities with other activities of staff, clients and students.
5. Documents research problem and results by compiling and assisting in writing results of study, including supportive data to confirm or deny research hypothesis, evaluation of methodology and summary of results.
6. Evaluates results of study through documented evaluation methodology by performing required surveys and data analysis or computations.
7. May submit reports of research methodology and results for publication or present results at conferences by making application to appropriate sources, by preparing paper or article.

Consultation with Community Agencies: Preventive Health Consultation
The objective is to consult with agencies or community committee (such as state mental health divisions, mental health and retardation committees, schools and geriatric facilities) to propose screening programs and day care facilities which identify and treat client problems before extensive care is required and which continue treatment of post-institutionalized clients. This is achieved by conferring, informing and advising.

1. Evaluates community needs and trends in health care services and supplies a basis for program development by exchanging information during conferences with community agency representatives, staff members and clients.
2. Consults with community action committees by exchanging data dealing with community needs, agency policies, procedures and programs by participating as a member of the committee (such as Drug Abuse Committee, Mental Retardation Committees, Health Care Workers recruitment committees) by exchanging information and ideas and by making group recommendations to the appropriate administrators or agencies.
3. Confers with officers of local agencies to plan, organize and coordinate programs by exchanging views and data dealing with community needs, agency policies, procedures and programs during formal and informal staff meetings.
4. Consults with community mental health agencies to promote normal psychosocial development and prevent future institutionalization by providing program information, advice and proposals designed for non-institutionalized populations (such as ghetto area programs, mentally retarded, day care program).
5. Consults with educational institutions and community agencies

(such as pre-schools, primary schools, public health department) that assess, treat and train clients for sensory-motor and perceptual development.

6. Assists in planning and developing developmental evaluation screening procedures for normal children to identify potential problems by conferring with educational institutions or others concerning the administration of screening procedures and by recommending treatment or training, when needed.

Activities Program Planning For Consultee Agency

The objective is to plan and develop general activity programs for implementation by consultee agency staff in order to assist clients in maintaining meaningful social relationships, developing rewarding avocational interests and adjusting to increased leisure time. This is achieved by: 1) analyzing and reviewing such factors as needed to meet program needs; 2) designing program proposal; 3) submitting proposal to consultee agency.

1. Analyzes specific program data on services required to meet needs of health care facilities by evaluating surveys of skills and interests of staff, client surveys, program surveys and budget limitations within facilities.
2. Develops staff and program recommendations by compiling and reviewing data about facilities, staff, space and equipment available, by reviewing data and designing a workable activity program and consultant services required to implement the program.
3. Illustrates and explains procedures to be used in providing service to facility by conferring with facility staff and exchanging views and data to reduce problems dealing with implementation or program.

Consultee Agency Staff Training

The objective is to instruct consultee agency staff to achieve independent competence in all aspects of activity program in order to help agency install activity program. This is accomplished by: 1) conducting classes; 2) demonstrating techniques; 3) training on the job; 4) reviewing and evaluating training program.

1. Trains facility staff to perform assigned duties of program by lecturing, using visual aids, demonstrating techniques and by supervising staff practice.
2. Evaluates level of staff comprehension of program objectives by using on-the-job observations to determine practical level of working competency, by interviewing home personnel and by reviewing progress reports on individual clients to substantiate effectiveness of program procedures and objectives.
3. Evaluates and reviews training program by consulting with facility management to determine workable methods of program improvement and by conferring with facility officers to evaluate success of program and staff training.

4. Confers with facility officers to terminate direct training and supervisory duties when staff is competent to function in order to assume new role as program consultant.

Consultation with Community Agencies: Continuing Consultation
The objective is to consult on continuing basis with facility or agency to maintain continuous advice and instruction to staff and occupational therapy services to clients. This is achieved by advising and teaching occupational therapy methods and techniques to staff.

1. Consults with consultee agency staff by 1) answering questions and suggesting alternative techniques and methods of treatment upon request, 2) maintaining communications with staff, 3) periodically reviewing and evaluating program in concert with consultee agency staff and by 4) identifying client problems and exploring alternatives with consultee staff.
2. Instructs staff of consultee agency in principles of occupational therapy by planning in-service education for advanced treatment or training, by demonstrating methods and techniques and giving advice concerning client or program problems.
3. Coordinates overall occupational therapy program by evaluating or supervising the evaluation of referred client, by suggesting treatment plans, by reviewing treatment plans and by conferring with staff concerning client progress and treatment implementation.

Consultation with Community Agencies: Data Collection for Program Planning
The objective may be to coordinate data collection and review data surveys concerning health care and services within the community to determine extent of consultee service needs; this can be accomplished by surveying and conferring with health professionals and with community organizations.

1. Collects data on health care trends in community health facilities by conferring with experts and by using information concerning previous working experience at health care facilities.
2. Obtains data concerning health services currently offered by sending surveys or questionnaires to community facilities to determine health care needs.
3. May review data surveys to determine if negotiations with agencies are warranted or needed by analyzing survey information.

OCCUPATIONAL THERAPY JOB DESCRIPTION

Program Development (Occupational Therapy Consultant)
(GED Level 6) (079.017)

II Supportive Activities:

Program Planning
Research
Program Planning for Consultee Agencies
Self Education
Continuing Education

Program Development (Occupational Therapy Consultant)

II Supportive Activities

Program Planning

The objective is to formulate, integrate and coordinate occupational therapy policies, procedures and programs and required organizational changes in order to provide required needs within establishment and community. This is done by: 1) identifying program needs; 2) making appropriate application for funding and support; 3) using health care theories, previous experiences, consultation with and feedback from staff and allied health care personnel.

1. Evaluates community needs and trends in health care services by reviewing available data to provide a basis for program development.
2. Analyzes information to identify new methods and procedures that may be implemented by reviewing professional journals and current literature.
3. Confers with medical specialists to determine what additional services occupational therapy can provide to clients.
4. Confers with staff from rehabilitation services, establishment or community agencies to determine new procedures or services needed.
5. Confers with computer programmer to develop coding system and format of occupational therapy data for programming into establishment computer.
6. Evaluates whether or not occupational therapy staff is challenged by current program, whether they would be capable of expanding the program, by conferring with them, observing work patterns and schedules.
7. Studies and reviews procedures of assigned work area to ascertain nature and frequency of tasks and workloads.
8. Analyzes current programs and estimates possible future programs by reviewing computer printouts and other records and reports, by examining data to estimate workloads, plan for expanded services and establish budget.
9. Develops and composes statement of program goals or pilot program by analyzing such factors as establishment policy, financial resources, physical facilities and need for staff development.
10. Develops occupational therapy programs by compiling data, reviewing and analyzing needs of clients, skills and abilities of occupational therapy staff, available staff time, availability of space materials and equipment, centralized as opposed to dispersed approach and by preparing detailed plan.
11. Develops educational programs by planning and arranging all teaching activity in the occupational therapy service.
12. Implements planning for new program by preparing rough drawing of floor plan, planning layout of facilities and special physical requirements, consulting with administrator or architect and specifying needs.

13. Plans type of equipment and supplies needed for new program by using information concerning client population and facilities available.
14. Develops and facilitates procedures such as client evaluation and progress reporting by preparing appropriate forms and by instructing in their use.
15. Plans for evaluation after implementation of program by designing quantitative and qualitative measures.
16. Budgets for programs by using data concerning available funds, time, equipment and type of service involved.
17. Promotes budget support for program either by conferring and consulting with administrative staff to ascertain availability of money and to obtain tentative approval of program implementation or, in cooperation with establishment staff, by preparing requests for financial grants for expansion of pilot programs from government or private foundations by following specified procedures.
18. Confers with physicians and other specialists and administrative staff to obtain support for program by describing and discussing the program objectives.
19. Obtain approval for program by submitting written description of plan with explanatory sketches to administration.
20. Composes occupational therapy service job descriptions by describing job duties and qualifications for employment, following format and methodology developed by establishment.
21. Assistsin developing or may develop pay scales by conferring with appropriate administrators to modify current wage structure based on economics of occupational group and by using data concerning work to be accomplished and labor market conditions.
22. Assists in and may determine fee schedule by reviewing with administrative personnel costs to service of staff time, materials, equipment, and overhead, by modifying fee schedule on a sliding scale.

Research

The objective is to plan, arrange and conduct research projects in order to support or deny current occupational therapy theories and to develop new treatment techniques. This is done by: 1) originating or collaborating in formulation of hypothesis; 2) reviewing related research reports; 3) developing research design; 4) applying for financial assistance; 5) directing research team; 6) recording data; 7) interpreting data results; 8) recording results; 9) submitting reviews to professional journals.

1. Develops or formulates research hypothesis by conferring with specialists, discussing research proposal possibilities (such as effectiveness of treatment techniques, client attitudes toward treatment, treatment follow-through) and by determining the method & means of investigation and evaluation.

2. Examines, studies and reviews related literature and research reports by analyzing data and interpreting relationships of related reports to proposed project.
3. Composes research project proposal in order to apply for financial support for the project by submitting application to the appropriate sources.
4. Implements research program in ongoing treatment or educational programs by coordinating research activities with other activities of staff and clients.
5. Documents research problem and results by compiling and writing results of study, including supportive data to confirm or deny research hypothesis, evaluation of methodology and summary of results.
6. May submit reports of research methodology and results for publication or may present results at conferences by making application and writing article or paper.

Program Planning for Consultee Agencies

The objective is to plan and develop specific occupational therapy program or project proposals in order to implement occupational therapy service needs for consultee agency. This is done by: 1) compiling, evaluating and integrating data analysis on current agency program and rehabilitation needs; 2) considering available budget and agency resources; 3) submitting proposed program to agency.

1. Compiles and examines field data on work areas and programs in consultee agency by a trial experience in occupational therapy within facility to determine extent of client needs and methods for occupational therapy function in proposed work areas.
2. Develops program and staff proposals by applying data evaluation of variables (such as client load, available space and equipment, skills of available staff, budget limitations, needs and priorities of particular client) and by determining the number, type and hours of consultant time required.
3. May promote services offered by occupational therapy consultant by circulating brochures, writing letters, phoning or arranging conference with consultee.
4. Negotiates proposed program with consultee agency by explaining procedures for providing services and by revising original program where warranted and when possible until agency is satisfied.

Self Education

The objective is to receive instruction in order to maintain and improve skills and knowledge and keep abreast of changing concepts and practices. This may be accomplished by attending conferences, seminars and training sessions, by reading, reviewing and evaluating materials related to work.

1. Receives instruction by attending and participating in conferences, workshops, seminars and training sessions.
2. Reviews and studies current concepts and practices by reading and analyzing tests, periodicals and manuals.

Continuing Education

The objective is to formulate, coordinate, and implement educational programs that meet the continuing education needs of specified groups of health care workers. This can be accomplished by: 1) planning or collaborating in planning educational conferences, workshops or seminars, 2) negotiating for funds and speakers or instructors, 3) directing committees or staff in implementation of program.

1. Compiles data concerning educational needs by surveying groups of health care workers.
2. Analyzes data concerning educational needs by reviewing survey results, by evaluating needs and determining feasibility of meeting needs through an educational program.
3. Designs educational program by conferring with group representatives, selecting appropriate methods and program format, and developing budgetary requirements.
4. Negotiates for funding by composing program and a budget proposal and submitting it to appropriate agency.
5. Negotiates for speakers or instructors, by verbal or written requests, by discussing and determining fees and contracting for fees and speaker or instructor responsibilities.
6. Implements program by planning and arranging time, place, duration and publicity.
7. Coordinates program implementation by supervising committees or staff in implementing program plans.